

Kansas Register

Ron Thornburgh, Secretary of State

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this issue	Page
Speech-Language Pathology/Audiology Advisory Board Notice of meeting	1068
Department of Human Resources Notice of maximum and minimum weekly benefit amounts	
Legislative interim committee schedule	1068
Secretary of State Executive appointments	1069
Kansas Department of Health and Environment Requests for comments on proposed air quality permits	. 1069, 1070, 1071, 1072
Kansas State University Notice to bidders	1072
Notice of Bond Sale U.S.D. 266, Sedgwick County City of Salina Reno County Fire District No. 6	1074
Pooled Money Investment Board Notice of investment rates	1074
Kansas Department on Aging Notice of funding availability	1075
Department of Administration—Division of Purchases Notice to bidders for state purchases	
State Corporation Commission Notice of petition for declaratory order	
Social and Rehabilitation Services Notice of hearing on proposed administrative regulations	1077
Kansas Department of Transportation Notice to contractors	
Social and Rehabilitation Services and Kansas Department on Aging Notice of final nursing facility Medicaid rates	1085
Index to administrative regulations	

Speech-Language Pathology/Audiology Advisory Board

Notice of Meeting

The Speech-Language Pathology/Audiology Advisory Board will meet at 10 a.m. Thursday, July 11, in Classroom C of the KNEA Building, 715 S.W. 10th Ave., Topeka.

Lesa Roberts, Director Health Occupations Credentialing

Doc. No. 028084

State of Kansas

Department of Human Resources

Notice of Maximum and Minimum Weekly Benefit Amounts

The maximum weekly benefit amount and the minimum weekly benefit amount payable with respect to new claims filed on or after July 1, 2002 and before July 1, 2003, are respectively \$345 and \$86. I hereby certify that these maximum and minimum weekly benefit amounts have been computed in accordance with K.S.A. 44-704 of the Kansas Employment Security Law, pursuant to which this announcement is published.

Richard E. Beyer Secretary of Human Resources

Doc. No. 028085

State of Kansas

Legislature

Interim Committee Schedule

The following committee meetings have been scheduled during the period of July 1-14. Requests for accommodation to participate in committee meetings should be made at least two working days in advance of the meeting by contacting Legislative Administrative Services at (785) 296-2391 or TTY (785) 296-8430. When available, agendas can be found at http://skyways.lib.ks.us/ksleg/KLRD/klrd.html.

Date	Room	Time	Committee	Agenda
July 1 July 2	123-S 123-S	10:00 a.m. 9:00 a.m.	Legislative Budget Committee	Agenda not available.
July 10	123-S	10:00 a.m.	Joint Committee on Administrative Rules and Regulations	Agenda not available.
July 10 July 11	514-S 514-S	10:00 a.m. 9:00 a.m.	Legislative Educational Planning Committee	Agenda not available.

Jeff Russell Director of Legislative Administrative Services

Doc. No. 028094

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Secretary of State

Executive Appointments

Executive appointments made by the Governor, and in some cases by other state officials, are filed with the Secretary of State's office. A complete listing of Kansas state agencies, boards and commissions, and county officials are included in the Kansas Directory, published by the Secretary of State. The directory also is available on the Secretary of State's Web site at www.kssos.org. The following appointments were recently filed with the Secretary of State:

Russell County Commissioner, 1st District

William Hickert, Russell County Courthouse, 4th & Main, Russell, 67665. Term expires when a successor is elected and qualifies according to law. Succeeds Jerry Ross, resigned.

Kansas Natural Resource Legacy Alliance

(Created pursuant to 2002 Session Laws of Kansas, Chapter 96.)

Wanda Adams, 8051 CC Road, Plains, 67869. Sheila Frahm, 410 N. Grant Ave., Colby, 67701.

John Stricker, Kansas State and Extension Forestry, 118 H G Gallaher Building, 2610 Claflin Road, Manhattan, 66502.

Southeast Kansas Regional Library System

Helen M. Barney, 430 Xylan Road, Humboldt, 66748. Term expires June 30, 2005. Reappointed.

Lorraine L. Davis, 1598 7000 Road, Edna, 67342. Term expires June 30, 2006. Reappointed.

Carl J. Druart, 21320 Lakeside Lane, Chanute, 66720. Term expires June 30, 2006. Succeeds Clifford Zumalt.

Shirley J. Palmer, 1862 Eagle Road, Fort Scott, 66701. Term expires June 30, 2005. Reappointed.

Violet J. Pazzie, 279 N. 200th St., Arma, 66712. Term expires June 30, 2005. Reappointed.

Jackie Seeley, Route 1, Box 27, Eureka, 67045. Term expires June 30, 2006. Succeeds Zenith Lindamond.

Sidna S. Small, Route 1, Box 216, Neodesha, 66757. Term expires June 30, 2006. Reappointed.

Mandy Specht, 470 U.S. Highway 54, Iola, 66749. Term expires June 30, 2005. Reappointed.

Elaine Stewart, 1746 Road 11, Moline, 67353. Term expires June 30, 2006. Reappointed.

Shirley Sweet, Route 1, Box 86A, Grenola, 67346. Term expires June 30, 2005. Succeeds Ruth Walker.

Carol Wittman, 27721 N.W. Florida Road, Garnett, 66032.

Real Estate Appraisal Board

Steven R. Adams, 652 N. Crestway St., Wichita, 67208. Term expires June 30, 2005. Reappointed.

Donna Hutcheson, Route 2, Box 9, Lakin, 67860. Term expires June 30, 2005. Succeeds LeRoy Leland.

James E. Pfeffer, 10990 Quivira Road, Suite 110, Shawnee Mission, 66210. Term expires June 30, 2005. Succeeds Alida Moore.

State Fair Board

John L. Rolfe, 4310 Ironwood St., Wichita, 67226. Term expires March 14, 2003. Succeeds Kelly Goss, resigned.

Ron Thornburgh Secretary of State

Doc. No. 028092

State of Kansas

Department of Health and Environment

Request for Comments

The Kansas Department of Health and Environment is soliciting comments regarding a proposed air quality construction permit. Johns Manville International, Inc. has applied for an air quality construction permit in accordance with the provisions of K.A.R. 28-19-300 to modify and increase capacity at its fiberglass manufacturing facility. Emissions of total particulate matter (PM), PM equal to or less than 10 microns in diameter (PM $_{10}$), volatile organic compounds (VOCs), oxides of nitrogen (Nox) and carbon monoxide (CO) were evaluated during the permit review process.

Johns Manville International, Inc., McPherson, owns and operates the stationary source located at 1465 17th Ave., McPherson, at which the fiberglass manufacturing facility is to be modified.

A copy of the proposed permit, permit application, all supporting documentation and all information relied upon during review of the permit application is available for public inspection for a period of 30 days from the date of publication during normal business hours at the KDHE, Bureau of Air and Radiation, 1000 S.W. Jackson, Suite 310, Topeka; and at the KDHE North Central District Office, 2501 Market Place, Suite D, Salina. To obtain or review the proposed permit and supporting documentation, contact Dana S. Morris, (785) 296-1578, at the KDHE central office; or Joan Ratzlaff, (785) 827-9639, at the KDHE North Central District Office. The standard departmental cost will be assessed for any copies requested.

Direct written comments or questions regarding the proposed permit to Dana S. Morris, KDHE, Bureau of Air and Radiation, 1000 S.W. Jackson, Suite 310, Topeka, 66612-1366. In order to be considered in formulating a final permit decision, written comments must be received by the close of business July 29.

A person may request a public hearing be held on the proposed permit. The request for a public hearing shall be in writing and set forth the basis for the request. The written request must be submitted to Connie Carreno, Bureau of Air and Radiation, not later than the close of business July 29 in order for the Secretary of Health and Environment to consider the request.

Clyde D. Graeber Secretary of Health and Environment

Department of Health and Environment

Request for Comments

The Kansas Department of Health and Environment is soliciting comments regarding a proposed air quality operating permit. Coffeyville Re-Con, Inc. has applied for a Class I operating permit in accordance with the provisions of K.A.R. 28-19-510 et seq. The purpose of a Class I permit is to identify the sources and types of regulated air pollutants emitted from the facility; the emission limitations, standards and requirements applicable to each source; and the monitoring, record keeping and reporting requirements applicable to each source as of the effective date of permit issuance.

Coffeyville Re-Con, Inc. owns and operates a facility that provides the service of reconditioning metal and poly drums for reuse, and prime painting castings located at 2410 Brown St., Coffeyville, Montgomery County.

A copy of the proposed permit, permit application, all supporting documentation and all information relied upon during the permit application review process is available for a 30-day public review during normal business hours at the KDHE, Bureau of Air and Radiation, 1000 S.W. Jackson, Suite 310, Topeka; and at the KDHE Southeast District Office, 1500 W. 7th, Chanute. To obtain or review the proposed permit and supporting documentation, contact Xiao Wu, (785) 296-1615, at the KDHE central office; or Lynelle Stranghoner, (620) 431-2390, at the KDHE Southeast District Office. The standard departmental cost will be assessed for any copies requested.

Direct written comments or questions regarding the proposed permit to Xiao Wu, KDHE, Bureau of Air and Radiation, 1000 S.W. Jackson, Suite 310, Topeka, 66612-1366. In order to be considered in formulating a final permit decision, written comments must be received by the close of business July 29.

A person may request a public hearing be held on the proposed permit. The request for a public hearing shall be in writing and set forth the basis for the request. The written request must be submitted to Connie Carreno, Bureau of Air and Radiation, not later than the close of business July 29 in order for the Secretary of Health and Environment to consider the request.

The U.S. Environmental Protection Agency has a 45-day review period, which will start concurrently with the 30-day public comment period, within which to object to the proposed permit. If the EPA has not objected in writing to the issuance of the permit within the 45-day review period, any person may petition the administrator of the EPA to review the permit. The 60-day public petition period will directly follow the EPA 45-day review period. If the EPA waives its 45-day review period, the 60-day public petition period will start directly after the 30-day public comment period. Interested parties may contact KDHE to determine if the EPA's 45-day review period has been waived.

Any such petition shall be based only on objections to the permit that were raised with reasonable specificity during the public comment period provided for in this notice, unless the petitioner demonstrates that it was impracticable to raise such objections within such period, or unless the grounds for such objection arose after such period. Contact Gary Schlicht, U.S. EPA, Region VII, Air Permitting and Compliance Branch, 901 N. 5th St., Kansas City, KS 66101, (913) 551-7097, to determine when the 45-day EPA review period ends and the 60-day petition period commences.

Clyde D. Graeber Secretary of Health and Environment

Doc. No. 028086

State of Kansas

Department of Health and Environment

Request for Comments

The Kansas Department of Health and Environment and the Unified Government of Wyandotte County/Kansas City, Kansas Department of Air Quality (DAQ) are soliciting comments regarding a proposed air quality construction permit. Williams Pipe Line Company, LLC has applied for an air quality construction permit in accordance with the provisions of K.A.R. 28-19-300 to modify a vapor combustion unit (VCU) and increase its relative air emission limitation. Emissions of volatile organic compounds were evaluated during the permit review process.

Williams Pipe Line Company, LLC, Tulsa, Oklahoma, owns and operates the stationary source located at 401 E. Donovan Road, Kansas City, Kansas, at which the VCU is to be modified.

A copy of the proposed permit, permit application, all supporting documentation and all information relied upon during review of the permit application is available for public inspection for a period of 30 days from the date of publication during normal business hours at the KDHE, Bureau of Air and Radiation, 1000 S.W. Jackson, Suite 310, Topeka; and at the DAQ, 619 Ann Ave., Kansas City, Kansas. To obtain or review the proposed permit and supporting documentation, contact Connie Carreno, (785) 296-6422, at the KDHE central office; or Jon W. Schuckman at the Department of Air Quality. The standard departmental cost will be assessed for any copies requested.

Direct written comments or questions regarding the proposed permit to Jon W. Schuckman, DAQ, 619 Ann Ave., Kansas City, KS 66101. In order to be considered in formulating a final permit decision, written comments must be received by the close of business July 29.

A person may request a public hearing be held on the proposed permit. The request for a public hearing shall be in writing and set forth the basis for the request. The written request must be submitted to Connie Carreno, Bureau of Air and Radiation, 1000 S.W. Jackson, Suite 310, Topeka, 66612-1366, not later than the close of business July 29 in order for the Secretary of Health and Environment to consider the request.

Clyde D. Graeber Secretary of Health and Environment

Department of Health and Environment

Request for Comments

The Kansas Department of Health and Environment is soliciting comments regarding a proposed air quality operating permit. Northern Natural Gas Company has applied for a Class I operating permit in accordance with the provisions of K.A.R. 28-19-510 et seq. The purpose of a Class I permit is to identify the sources and types of regulated air pollutants emitted from the facility; the emission limitations, standards and requirements applicable to each source; and the monitoring, record keeping and reporting requirements applicable to each source as of the effective date of permit issuance.

Northern Natural Gas Company, Liberal, owns and operates a natural gas compressor station located at Section 10, Township 30 South, Range 26 West, Meade County.

A copy of the proposed permit, permit application, all supporting documentation and all information relied upon during the permit application review process is available for a 30-day public review during normal business hours at the KDHE, Bureau of Air and Radiation, 1000 S.W. Jackson, Suite 310, Topeka; and at the KDHE South Central District Office, 130 S. Market, sixth floor, Wichita. To obtain or review the proposed permit and supporting documentation, contact Michael J. Parhomek, (785) 296-1580, at the KDHE central office; or David Butler, (316) 337-6020, at the KDHE South Central District Office. The standard departmental cost will be assessed for any copies requested.

Direct written comments or questions regarding the proposed permit to Michael J. Parhomek, KDHE, Bureau of Air and Radiation, 1000 S.W. Jackson, Suite 310, Topeka, 66612-1366. In order to be considered in formulating a final permit decision, written comments must be received by the close of business July 29.

A person may request a public hearing be held on the proposed permit. The request for a public hearing shall be in writing and set forth the basis for the request. The written request must be submitted to Connie Carreno, Bureau of Air and Radiation, not later than the close of business July 29 in order for the Secretary of Health and Environment to consider the request.

The U.S. Environmental Protection Agency has a 45-day review period, which will start concurrently with the 30-day public comment period, within which to object to the proposed permit. If the EPA has not objected in writing to the issuance of the permit within the 45-day review period, any person may petition the administrator of the EPA to review the permit. The 60-day public petition period will directly follow the EPA 45-day review period. If the EPA waives its 45-day review period, the 60-day public petition period will start directly after the 30-day public comment period. Interested parties may contact KDHE to determine if the EPA's 45-day review period has been waived.

Any such petition shall be based only on objections to the permit that were raised with reasonable specificity during the public comment period provided for in this notice, unless the petitioner demonstrates that it was impracticable to raise such objections within such period, or unless the grounds for such objection arose after such period. Contact Gary Schlicht, U.S. EPA, Region VII, Air Permitting and Compliance Branch, 901 N. 5th St., Kansas City, KS 66101, (913) 551-7097, to determine when the 45-day EPA review period ends and the 60-day petition period commences.

Clyde D. Graeber Secretary of Health and Environment

Doc. No. 028082

State of Kansas

Department of Health and Environment

Request for Comments

The Kansas Department of Health and Environment is soliciting comments regarding a proposed air quality construction permit. Bunge North America, Inc. has applied for an air quality construction permit in accordance with the provisions of K.A.R. 28-19-300 to modify the meal rail loadout system. Emissions of particulate matter (PM) were evaluated during the permit review process.

Bunge North America, Inc., St. Louis, Missouri, owns and operates the stationary source located at 700 E. 5th St., Emporia, Kansas, at which the meal rail loadout system is to be modified.

A copy of the proposed permit, permit application, all supporting documentation and all information relied upon during review of the permit application is available for public inspection for a period of 30 days from the date of publication during normal business hours at the KDHE, Bureau of Air and Radiation, 1000 S.W. Jackson, Suite 310, Topeka; and at the KDHE Southeast District Office, 1500 W. 7th, Chanute. To obtain or review the proposed permit and supporting documentation, contact David A. Peter, (785) 296-1104, at the KDHE central office; or Lynelle Stranghoner, (620) 431-2390, at the KDHE Southeast District Office. The standard departmental cost will be assessed for any copies requested.

Direct written comments or questions regarding the proposed permit to David A. Peter, KDHE, Bureau of Air and Radiation, 1000 S.W. Jackson, Suite 310, Topeka, 66612-1366. In order to be considered in formulating a final permit decision, written comments must be received by the close of business July 29.

A person may request a public hearing be held on the proposed permit. The request for a public hearing shall be in writing and set forth the basis for the request. The written request must be submitted to Connie Carreno, Bureau of Air and Radiation, not later than the close of business July 29 in order for the Secretary of Health and Environment to consider the request.

Clyde D. Graeber Secretary of Health and Environment

Kansas State University

Notice to Bidders

The State of Kansas, Kansas State University, offers for sale through sealed bids the following land located in Riley County. The right is reserved to accept or reject any or all bids or parts of bids and to waive informalities therein.

Description of Land

The property consists of a 10.92 acre tract of land located at the northwest quadrant of the Claflin Road and College Avenue intersection in Manhattan. The property is improved by various buildings utilized by the Kansas Artificial Breeding Service Unit of Kansas State University. The legal description of the land is:

Beginning at a point that is 45 feet West of a point 490 feet south of the North East Corner of the South West Quarter of Section 12, Township 10, Range 7, thence South 793 feet, thence West 600 feet, thence North 793 feet, and thence East 600 feet to the point of beginning, comprising 10.92 acres, more or less.

Conditions of Sale

All of the seller's rights, title and interest in the described real estate will be conveyed by quitclaim deed on behalf of Kansas State University by the Board of Regents. Said real estate will be available not later than 60 days after acceptance of a qualified bid. Bids must be not less than the appraised value of \$1,122,000.

The buyer of the property agrees to a memorial/tribute being established on 600 square feet of the southeast corner of the property to commemorate Bluemont Central College, original location of the Land Grant University deeded to the State of Kansas on June 10, 1863. Kansas State University will be responsible for maintaining the memorial area, but the buyer retains ownership of the land.

Bid Guarantee

Each bid will be accompanied by a certified check in the amount of 5 percent of such bid, which sum will be forfeited in case of default by any bidder whose bid is accepted. The State Board of Regents reserves the right to accept or reject any and all bids.

Sealed bids will be received until 2 p.m. Monday, July 29, by the Director of Purchasing, Kansas State University, Room 21, Anderson Hall, Manhattan, 66506-0108, at which time they will be publicly opened. Interested bidders may call Keith Ratzloff, Assistant Vice President for Administration and Finance/Controller, (785) 532-6210, for additional information.

William H. Sesler Director of Purchases

Doc. No. 028097

State of Kansas

Department of Health and Environment

Request for Comments

The Kansas Department of Health and Environment is soliciting comments regarding a proposed air quality operating permit. Kice Industries, Inc. has applied for a Class I operating permit in accordance with the provisions of K.A.R. 28-19-510 et seq. The purpose of a Class I permit is to identify the sources and types of regulated air pollutants emitted from the facility; the emission limitations, standards and requirements applicable to each source; and the monitoring, record keeping and reporting requirements applicable to each source as of the effective date of permit issuance.

Kice Industries, Inc., Wichita, owns and operates a facility that manufactures industrial air systems to move dry materials, such as grain, flour, etc., located at 2040 S. Mead, Wichita, Sedgwick County.

A copy of the proposed permit, permit application, all supporting documentation and all information relied upon during the permit application review process is available for a 30-day public review during normal business hours at the KDHE, Bureau of Air and Radiation, 1000 S.W. Jackson, Suite 310, Topeka; and at the Wichita-Sedgwick County Department of Community Health, 1900 E. 9th, Wichita. To obtain or review the proposed permit and supporting documentation, contact Xiao Wu, (785) 296-1615, at the KDHE central office; or Randy Owen, (316) 268-8448, at the Wichita-Sedgwick County Department of Community Health. The standard departmental cost will be assessed for any copies requested.

Direct written comments or questions regarding the proposed permit to Xiao Wu, KDHE, Bureau of Air and Radiation, 1000 S.W. Jackson, Suite 310, Topeka, 66612-1366. In order to be considered in formulating a final permit decision, written comments must be received by the close of business July 29.

A person may request a public hearing be held on the proposed permit. The request for a public hearing shall be in writing and set forth the basis for the request. The written request must be submitted to Connie Carreno, Bureau of Air and Radiation, not later than the close of business July 29 in order for the Secretary of Health and Environment to consider the request.

The U.S. Environmental Protection Agency has a 45-day review period, which will start concurrently with the 30-day public comment period, within which to object to the proposed permit. If the EPA has not objected in writing to the issuance of the permit within the 45-day review period, any person may petition the administrator of the EPA to review the permit. The 60-day public petition period will directly follow the EPA 45-day review period. If the EPA waives its 45-day review period, the 60-day public petition period will start directly after the 30-day public comment period. Interested parties may contact KDHE to determine if the EPA's 45-day review period has been waived.

Any such petition shall be based only on objections to the permit that were raised with reasonable specificity during the public comment period provided for in this notice, unless the petitioner demonstrates that it was impracticable to raise such objections within such period, or unless the grounds for such objection arose after such period. Contact Gary Schlicht, U.S. EPA, Region VII, Air Permitting and Compliance Branch, 901 N. 5th St., Kansas City, KS 66101, (913) 551-7097, to determine when the 45-day EPA review period ends and the 60-day petition period commences.

Clyde D. Graeber Secretary of Health and Environment

Doc. No. 028087

(Published in the Kansas Register June 27, 2002.)

Summary Notice of Bond Sale Unified School District No. 266 Sedgwick County, Kansas (Maize) \$8,715,000 General Obligation School Building Bonds Series 2002

(General obligation bonds payable from unlimited ad valorem taxes)

Bids

Subject to the notice of bond sale dated June 10, 2002, sealed, facsimile and electronic bids will be received by the clerk of Unified School District No. 266, Sedgwick County, Kansas (Maize) (the issuer), in the case of sealed and facsimile bids, on behalf of the governing body at the office of the Board of Education, 201 S. Park, Maize, KS 67101, and in the case of electronic bids, through i-Deal's BiDCOMP/PARITY® electronic bid submission system, until 3 p.m. July 15, 2002, for the purchase of \$8,715,000 principal amount of General Obligation School Building Bonds, Series 2002. No bid of less than 100 percent of the principal amount of the bonds and accrued interest thereon to the date of delivery will be considered.

Bond Details

The bonds will consist of fully registered bonds in the denomination of \$5,000 or any integral multiple thereof. The bonds will be dated July 1, 2002, and will become due on September 1 in the years as follows:

Year	Principal Amount
2005	\$125,000
2006	165,000
2007	215,000
2008	260,000
2009	320,000
2010	375,000
2011	420,000
2012	470,000
2013	510,000
2014	555,000
2015	605,000
2016	650,000
2017	690,000
2018	755,000

2019	815,000
2020	865,000
2021	920,000

The bonds will bear interest from the date thereof at rates to be determined when the bonds are sold as hereinafter provided, which interest will be payable semiannually on March 1 and September 1 in each year, beginning March 1, 2003.

Optional Book-Entry-Only System

The successful bidder may elect to have the bonds registered under a book-entry-only system administered through DTC.

Paying Agent and Bond Registrar

Kansas State Treasurer, Topeka, Kansas.

Good Faith Deposit

Each bid shall be accompanied by a good faith deposit in the form of a cashier's or certified check drawn on a bank located in the United States or a qualified financial surety bond in the amount of \$174,300 (2 percent of the principal amount of the bonds).

Delivery

The issuer will pay for printing the bonds and will deliver the same properly prepared, executed and registered without cost to the successful bidder on or about August 6, 2002, to DTC for the account of the successful bidder or at such bank or trust company in the contiguous United States as may be specified by the successful bidder, or elsewhere at the expense of the successful bidder.

Assessed Valuation and Indebtedness

The equalized assessed tangible valuation for computation of bonded debt limitations for the year 2001 is \$197,028,728. The total general obligation indebtedness of the issuer as of the date of delivery of the bonds, including the bonds being sold, is \$46,265,000.

Approval of Bonds

The bonds will be sold subject to the legal opinion of Gilmore & Bell, P.C., Wichita, Kansas, bond counsel, whose approving legal opinion as to the validity of the bonds will be furnished and paid for by the issuer, printed on the bonds and delivered to the successful bidder when the bonds are delivered.

Additional Information

Additional information regarding the bonds may be obtained from the clerk, (316) 722-0614, fax (316) 722-8538; or from the financial advisor, Claymore Securities, Inc., 250 N. Rock Road, Suite 150, Wichita, KS 67206-2241, Attention: Stephen E. Shogren, (316) 681-3123, fax (316) 681-3027.

Dated June 10, 2002.

Unified School District No. 266 Sedgwick County, Kansas (Maize)

State of Kansas **Pooled Money Investment Board**

Notice of Investment Rates

The following rates are published in accordance with K.S.A. 75-4210. These rates and their uses are defined in K.S.A. 12-1675(b)(c)(d), 75-4201(l) and 75-4209(a)(1)(B).

Effective 6-24-02 through 6-30-02

Term	Rate
1-89 days	1.74%
3 months	1.66%
6 months	1.77%
1 year	2.02%
18 months	2.49%
2 years	2.79%

Derl S. Treff Director of Investments

Doc. No. 028077

(Published in the Kansas Register June 27, 2002.)

Summary Notice of Sale City of Salina, Kansas \$1.980,000*

General Obligation Internal Improvement Bonds Series 2002-B

Bids

Subject to the notice of sale and preliminary official statement, sealed, facsimile and electronic bids for the purchase of \$1,980,000* of General Obligation Internal Improvement Bonds, Series 2002-B, of the City of Salina, Kansas, will be received (1) in the case of sealed and facsimile bids, by the city clerk at the address and fax number hereinafter set forth, and (2) in the case of electronic bids, through PARITY electronic bid submission system, until 2 p.m. local time Monday, July 8, 2002, at which time such bids will be publicly read. No bid will be considered of less than 100.00 percent of the principal amount of the bonds and accrued interest to the date of delivery.

Bond Details

The bonds will be dated July 15, 2002, and will mature serially on October 1 in the years and in the amounts set forth below. The bonds will consist of fully registered certificated bonds, each in the denomination of \$5,000 or integral multiples thereof. Interest will be payable semiannually on April 1 and October 1 (the interest payment dates), beginning April 1, 2003. The Kansas State Treasurer will be the paying agent and bond registrar for the bonds.

The bonds will become due on the stated maturity dates as follows:

Principal	Maturity
Amount *	October 1
\$135,000	2003
135,000	2004
135,000	2005
135,000	2006
135,000	2007
135,000	2008

130,000	2009
130,000	2010
130,000	2011
130,000	2012
130,000	2013
130,000	2014
130,000	2015
130,000	2016
130,000	2017

Redemption Prior to Maturity

The bonds will be subject to mandatory and optional redemption prior to maturity as provided in the notice of sale and preliminary official statement.

Good Faith Deposit

Each bid for the bonds must be accompanied by a good faith deposit in the form of a certified or cashier's check or a financial surety bond in the amount of 2 percent of the principal amount of the bonds, payable to the order of the city.

Delivery

The city will pay for preparing the bonds. Delivery of the bonds will be made to the successful bidder on or about July 25, 2002, through the facilities of the Depository Trust Company in New York, New York.

Assessed Valuation and Indebtedness

The equalized assessed tangible valuation for computation of bonded debt limitations is \$344,262,774. The total general obligation indebtedness of the city as of the date of the bonds, including the bonds being sold but excluding the temporary notes to be retired with the proceeds of the bonds being sold, is \$41,716,460.

Approval of Bonds

The bonds will be sold subject to the approving legal opinion of Gilmore & Bell, P.C., Kansas City, Missouri, bond counsel, which opinion will be furnished and paid for by the city, will accompany the bonds and will be delivered to the successful bidder when the bonds are delivered.

Additional Information

Additional copies of this notice of sale, official bid forms or further information may be obtained from the undersigned or from George K. Baum & Company, 12 Wyandotte Plaza, Kansas City, MO 64105, (816) 474-1100, the city's financial advisor.

Dated June 3, 2002.

City of Salina, Kansas By Lieu Ann Nicola City Clerk Room 206 City/County Building 300 W. Ash Salina, KS 67402-0736 (785) 309-5735 Fax (785) 309-5738

^{*} Preliminary, subject to change

(Published in the Kansas Register June 27, 2002.)

Summary Notice of Bond Sale Reno County Fire District No. 6 Reno County, Kansas \$175,000

General Obligation Bonds, Series 2002

(General obligation bonds payable from unlimited ad valorem taxes)

Bids

Subject to the notice of bond sale dated June 19, 2002, written bids will be received by the clerk of Reno County, Kansas, as recording officer for Reno County Fire District No. 6, Reno County, Kansas (the issuer), on behalf of the Board of County Commissioners of Reno County, Kansas, in its capacity as governing body of the issuer, at 206 W. 1st, Hutchinson, KS 67501, until 11 a.m. July 10, 2002, for the purchase of \$175,000 principal amount of General Obligation Bonds, Series 2002. No bid of less than 100 percent of the principal amount of the bonds and accrued interest thereon to the date of delivery will be considered.

Bond Details

The bonds will consist of fully registered bonds in the denomination of \$5,000 or any integral multiple thereof. The bonds will be dated July 15, 2002, and will become due on December 1 in the years as follows:

Year	Principal Amount
2003	\$ 5,000
2004	10,000
2005	10,000
2006	10,000
2007	10,000
2008	10,000
2009	10,000
2010	10,000
2011	10,000
2012	15,000
2013	15,000
2014	15,000
2015	15,000
2016	15,000
2017	15,000

The bonds will bear interest from the date thereof at rates to be determined when the bonds are sold as hereinafter provided, which interest will be payable semiannually on June 1 and December 1 in each year, beginning June 1, 2003.

Optional Book-Entry-Only System

The successful bidder may elect to have the bonds registered under a book-entry-only system administered through DTC.

Paying Agent and Bond Registrar

Kansas State Treasurer, Topeka, Kansas.

Good Faith Deposit

Each bid shall be accompanied by a good faith deposit in the form of a cashier's or certified check drawn on a bank located in the United States or a qualified financial surety bond in the amount of \$3,500 (2 percent of the principal amount of the bonds).

Delivery

The issuer will pay for printing the bonds and will deliver the same properly prepared, executed and registered without cost to the successful bidder on or about July 24, 2002, to DTC for the account of the successful bidder or at such bank or trust company in the contiguous United States as may be specified by the successful bidder, or elsewhere at the expense of the successful bidder.

Assessed Valuation and Indebtedness

The equalized assessed tangible valuation for computation of bonded debt limitations for the year 2001 is \$5,560,607. The total general obligation indebtedness of the issuer as of the date of delivery of the bonds, including the bonds being sold, is \$175,000.

Approval of Bonds

The bonds will be sold subject to the legal opinion of Gilmore & Bell, P.C., Wichita, Kansas, bond counsel, whose approving legal opinion as to the validity of the bonds will be furnished and paid for by the issuer, printed on the bonds and delivered to the successful bidder when the bonds are delivered.

Additional Information

Additional information regarding the bonds may be obtained from the clerk, (620) 694-2934, fax (620) 694-2534.

Dated June 19, 2002.

Reno County Fire District No. 6 Reno County, Kansas

Doc. No. 028105

State of Kansas

Department on Aging

Notice of Funding Availability

The Kansas Department on Aging hereby announces the availability of loans for senior services and housing options from the Partnership Loan Program (PLP). The Kansas Intergovernmental Transfer (KSIT) Program generated these funds. They are to be utilized for:

- Converting all or part of adult care homes, such as nursing facilities, to alternative housing options;
- Converting private residences to Home Plus facilities, provided the owners intend to reside in the home;
- Modifying space in rural hospitals to provide a long-term Medicaid-certified care unit;
- Improving quality in adult care homes that serve the elderly population;
- Building or renovating congregate housing for seniors in cities with populations of 2,500 or less;
- Contracting by rural hospitals for physicians, physician assistants, or professional nurses; or
- Other similar projects providing service and housing options for elder Kansans.

Loans may be for the full amount of the project or provide partial financing to ensure the project has the total (continued)

amount of financing necessary for completion. Applicants must understand that these funds are distributed as loans; the principal and interest on the loans must be repaid and may not be forgiven.

Eligible applicants are owners of:

- Adult care homes, such as Adult Day Care, Boarding Care Homes, Home Plus, Residential Health Care, Assisted Living and Nursing Facilities;
- Hospitals or long-term care units that are certified to serve Medicaid residents;
- Private residences to be converted to Home Plus facilities; and
- Senior housing projects in Kansas cities with a population of 2,500 or less.

Interested parties should contact the Department on Aging for application instructions and program guidelines and the Partnership Loan Program application forms. Applications must be consistent with a current needs analysis and have professional quality, demonstrating organization, clarity and understanding of the proposed venture. Areas of the state where housing and service options for the elderly are limited will be targeted. Units of government, not-for-profit entities, for-profit organizations and individuals may apply for loan funds, and preference for the loans may be given in that order.

Loans may be at current market rates or lower and may be fully secured, partially secured or unsecured. Applications proposing higher interest rates and loans with better security may be given preference. Facilities with fewer than 60 beds also will be given special consideration. Other factors to be considered include, but are not limited to: the elderly population and their economic status by county; the quality, quantity and type of existing housing units and services available and affordable for seniors; and community resources and supports available to the venture. Applications also will be evaluated based on project design, financial feasibility, organizational capacity and development readiness.

Applications must be received at the Department on Aging not later than 5 p.m. September 30. To request the Partnership Loan Program application instructions, program guidelines and application form, contact:

Janet Boskill (785) 296-6319 or 1-800-432-3535 janetb@aging.state.ks.us Kansas Department on Aging New England Building 503 S. Kansas Ave. Topeka, 66603-3404 Fax (785) 296-0256

Loan applications and guidelines are available in PDF format on the agency's Web site at www.agingkansas.org/kdoa/programs/partnershiploan.htm. Loan applications also are available in a Microsoft Word document as a fill-in form. Please contact Janet Boskill to request this form.

For questions or further information regarding the Partnership Loan Program, contact Randy Volz at the address above, (785) 296-6029 or 1-800-432-3535, or randyv@aging.state.ks.us.

Connie Hubbell Secretary of Aging State of Kansas

Department of Administration Division of Purchases

Notice to Bidders

Sealed bids for the following items will be received by the Director of Purchases, Room 102, Landon State Office Building, 900 S.W. Jackson, Room 102, Topeka, 66612, until 2 p.m. on the date indicated and then will be publicly opened. Interested bidders may call (785) 296-2377 for additional information:

Tuesday, July 9, 2002

05160

Department of Social and Rehabilitation Services— Security Guard Services, Armed

05198

Lansing Correctional Facility—Aboveground Fuel Storage Tanks

Wednesday, July 10, 2002

05196

Statewide—Ice and Snow Removal Chemicals

Thursday, July 11, 2002

A-9373(A)

University of Kansas—North Parking Lots, Edwards Campus, Overland Park

05147

University of Kansas—Rental of Student Refrigerator/ Freezer/Microwave Units

05194

Statewide—Coarse and Industrial Papers

Monday, July 15, 2002

05188

Department of Wildlife and Parks—Renovation of Shooting Range, Pretty Prairie

Wednesday, September 4, 2002

05164

Kansas State University—Equipment Maintenance Insurance

Request for Proposals

Monday, July 8, 2002 05168

Janitorial and Maintenance Services for the Department of Transportation, Topeka

Tuesday, July 16, 2002

05185

Temporary Services—Parking Attendants for the University of Kansas

Wednesday, July 24, 2002

05163

Economic Enhancement Strategy for the Department of Commerce and Housing

John T. Houlihan Director of Purchases

Doc. No. 028098

State Corporation Commission

Notice of Petition for Declaratory Order

In the Matter of the Petition of Conservation Staff for a Declar-)	
atory Order Concerning)	Docket No. 02-CONS-294-CREG
Commission Orders Authorizing)	
Injection Wells)	

To: All Oil and Gas Producers and Oil and Gas Purchasers, Royalty Owners, Land Owners, and All Persons Whatsoever Concerned:

You are hereby notified that the staff of the State Corporation Commission, Conservation Division, has filed a petition with the State Corporation Commission requesting an order declaring that commission orders authorizing injection issued prior to April 5, 2002, be considered permits under amended regulations K.A.R. 82-3-400 et seq. and subject to amendment and cancellation for good cause by the Conservation Division as provided for in the amended regulations.

You are further notified that unless written protest is received by the State Corporation Commission within 15 days after publication of this notice, the petition in this matter will be granted by administrative approval after said 15-day period. Any such protest should be mailed to the State Corporation Commission, Conservation Division, 130 S. Market, Room 2078, Wichita, 67202. A hearing on the petition, if necessary, will be held at 10 a.m. August 1 in Room 2078, 130 S. Market, Wichita.

For additional information, contact John McCannon, Assistant General Counsel, State Corporation Commission, Conservation Division, at the address above, (316) 337-6200.

Jeff Wagaman Executive Director

Doc. No. 028093

State of Kansas

Social and Rehabilitation Services

Notice of Hearing on Proposed Administrative Regulations

A public hearing will be conducted at 10:30 a.m. Thursday, September 5, in Room C, SRS Organizational Development, 2650 S.W. East Circle Drive, Topeka, to consider the adoption of amendments to existing rules and regulations on a permanent basis effective 15 days after publication in the Kansas Register. Telephone conference will not be available.

This 60-day notice of the public hearing shall constitute a public comment period for the proposed regulations. All interested parties may submit written comments prior to or during the public hearing to Hope Burns, office of the secretary for SRS, Docking State Office Building, Room 603-N, 915 S.W. Harrison, Topeka, 66612. All interested parties will be given a reasonable opportunity to present their views, but it may be necessary to request each participant to limit any oral presentation to five minutes. Copies of the regulations and the economic im-

pact statement may be obtained by contacting Hope Burns at (785) 296-3969.

Any individual with a disability may request accommodation in order to participate in the public hearing and may request the proposed regulations and economic impact statements in an accessible format. Requests for accommodation should be made at least five working days in advance of the hearing by contacting Hope Burns or by calling the Kansas Relay Center at 1-800-766-3777.

The adoption of the regulations will take place at 10 a.m. Tuesday, September 17, in the SRS executive conference room, 603-N, Docking State Office Building. Telephone conference will not be available.

A summary of the proposed regulations and the economic impact follows:

Article 60.—COMMUNITY MENTAL HEALTH CENTERS-CMHC AND AFFILIATED COMMUNITY MENTAL HEALTH SERVICE PROVIDERS-ACMHSP

30-60-1. Scope. This regulation is being amended to provide for licensing and setting of standards for affiliated community mental health service providers not previously licensed by these regulations.

Economic Impact: This will increase the workload for some SRS licensing staff and will increase the amount of travel required by licensing staff. Currently, this regulation change will require SRS staff to license five additional agencies. SRS will absorb the travel costs and adjust licensing staff workload to accommodate the additional licensing activities.

Bearer of Cost: SRS.

Affected Parties: ACMHSPs and SRS licensing staff.

Other Methods: This was determined the most appropriate method for the desired outcome, rather than a statutory or policy change. A work group of system stakeholders had input into the drafting of this regulatory change.

30-60-2. Definitions. This regulation is being amended to define terms used in regulations.

Economic Impact: None.

Bearer of Cost: None.

Affected Parties: CMHCs and ACMHSPs.

Other Methods: This was determined the most appropriate method for the desired outcome, rather than a statutory or policy change. A work group of system stakeholders had input into the drafting of this regulatory change.

30-60-5. Two types of license; requirements. This regulation is being amended to allow the secretary to issue a license to an ACMHSP that maintains an affiliation agreement with each CMHC within whose service area the agency provides service and that remains in compliance with all applicable requirements.

Economic Impact: None.

Bearer of Cost: None.

Affected Parties: ACMHSPs.

Other Methods: This was determined the most appropriate method for the desired outcome, rather than a statutory or policy change. A work group of system stake-

holders had input into the drafting of this regulatory change.

30-60-6. Licensing procedure; compliance survey; duration and renewal of a license; provisional license. This regulation is being amended to clarify that technical assistance or department quality assurance activities provided to a licensee are not to be construed as formal resurvey process. The regulation also clarifies the licensing renewal process, institutes a process for CMHC or ACMHSP disagreement with survey findings, specifies the types of licenses that may be issued based on findings, describes the re-survey processes, and denial of a license.

Economic Impact: None.

Bearer of Cost: None.

Affected Parties: SRS, CMHCs and ACMHSPs.

Other Methods: This was determined the most appropriate method for the desired outcome, rather than a statutory or policy change. A work group of system stakeholders had input into the drafting of this regulatory change.

30-60-7. Suspension; revocation of a license; procedure; voluntary surrender. This regulation is being amended to clarify license revocation procedures and add a provision for voluntary surrender of license. In the case of revocation or voluntary surrender of license, the regulation adds a requirement that a plan will be developed that provides for the transfer of consumers receiving services from the licensee to another appropriate provider of services

Economic Impact: None.

Bearer of Cost: None.

Affected Parties: CMHCs, ACMHSPs and consumers.

Other Methods: This was determined the most appropriate method for the desired outcome, rather than a statutory or policy change. A work group of system stakeholders had input into the drafting of this regulatory change.

30-60-8. Notice of need of a license; order to cease; appeal. This regulation is being added to ensure that a CMHC or an ACMHSP does not provide services without a license from SRS. Once the agency is notified by SRS of the need to be licensed, if the agency fails to submit an application for license, SRS would issue a cease order. This regulation includes a provision for appeal of the cease order to the office of administrative hearings.

Economic Impact: None.

Bearer of Cost: None.

Affected Parties: CMHCs, ACMHSPs and consumers who are receiving services from an unlicensed provider.

Other Methods: This was determined the most appropriate method for the desired outcome, rather than a statutory or policy change. A work group of system stakeholders had input into the drafting of this regulatory change.

30-60-10. Establishment of a new community mental health center; altered service area. This regulation is being amended to add a provision allowing the secretary to consider establishment of a new CMHC or altered service area if the board or boards of county commissioners notify the secretary of (1) their intent to withdraw their des-

ignation of the existing CMHC to serve that area, or (2) request that the secretary approve the establishment of a new CMHC.

Economic Impact: None. Bearer of Cost: None. Affected Parties: CMHCs.

Other Methods: This was determined the most appropriate method for the desired outcome, rather than a statutory or policy change. A work group of system stakeholders had input into the drafting of this regulatory change.

30-60-11. Necessary elements for a proposal to establish a new community mental health center or to realign the service area of one or more existing centers. This regulation is being amended for only technical changes in nature (typographical, etc.) and such corrections do not affect policy.

Economic Impact: None. Bearer of Cost: None. Affected Parties: None.

30-60-12. Approval or disapproval of a proposal to establish a new community mental health center or to realign the service area of one or more existing centers. This regulation is being amended for only technical changes in nature (typographical, etc.) and such corrections do not affect policy.

Economic Impact: None. Bearer of Cost: None. Affected parties: None.

30-60-13. Responsibility for compliance. This regulation is being added to specify CMHCs' responsibility for their own compliance with the requirements of this article, for contractors' compliance and for ACMHSPs' compliance with certain regulations. The regulation also states the ACMHSP's responsibility for compliance with all applicable requirements of this article including regulations that are specific to the services and programs that the ACMHSP has agreed to provide in their affiliation agreement with the CMHC.

Economic Impact: None.

Bearer of Cost: None.

Affected Parties: CMHCs and ACMHSPs.

Other Methods: This was determined the most appropriate method for the desired outcome, rather than a statutory or policy change. A work group of system stakeholders had input into the drafting of this regulatory change.

30-60-14. Departmental assistance; cooperation with compliance monitoring. This regulation is being added to allow division employees access to CMHC information in order to provide technical assistance, quality improvement activities, or to determine the licensee's compliance with these regulations.

Economic Impact: None.

Bearer of Cost: None.

Affected Parties: CMHCs and ACMHSPs.

Other Methods: This was determined the most appropriate method for the desired outcome, rather than a statutory or policy change. A work group of system stake-

holders had input into the drafting of this regulatory change.

30-60-15. Access; identification; information. This regulation is being moved in this article and clarification is added to specify the CMHC's responsibility to attempt to overcome barriers that consumers may have to receiving services and the CMHC's responsibility to make information such as services provided and CMHC location known to the general public.

Economic Impact: None.

Bearer of Cost: None.

Affected Parties: Consumers, CMHCs and ACMHSPs. Other Methods: This was determined the most appropriate method for the desired outcome, rather than a statutory or policy change. A work group of system stakeholders had input into the drafting of this regulatory change.

30-60-16. No denial of required services; exceptions; requirements; rights, documentation. This regulation is being added to clarify the conditions under which a CMHC may deny services to a consumer and the required actions by the CMHC following a denial of services. If a consumer is denied required services by the CMHC, the CMHC must notify the division in writing of this decision, the reasons for the denial decision, and must refer the consumer to another provider for these services. This referral to another provider may include making arrangements for the CMHC to pay the provider for services. Each person denied services shall be informed by the CMHC of their right to file a complaint and be informed of the process for filing a complaint.

Economic Impact: Anticipate minimal economic impact, depending upon the number of CMHC denials of services and necessary financial arrangements with alternative providers for payment of services by CMHC.

Bearer of Cost: CMHCs.

Affected Parties: Consumers and CMHCs.

Other Methods: This was determined the most appropriate method for the desired outcome, rather than a statutory or policy change. A work group of system stakeholders had input into the drafting of this regulatory change.

30-60-17. Prohibition against denial of required services because of an inability or failure to pay; fees; establishment of a schedule of fees; adjustment; disclosure; reviews; collection of fees. This regulation is being amended to clarify that CMHCs may not deny required services to consumers because of a consumer's inability or failure to pay for services. The regulation also specifies CMHCs' and ACMHSPs' responsibility to establish a schedule of fees, adjust fees as appropriate, make fee schedule known to consumers, periodically review consumer's fees and establish a policy and procedure for collection of fees.

Economic Impact: None.

Bearer of Cost: None.

Affected Parties: Consumers, CMHCs and ACMHSPs. Other Methods: This was determined the most appropriate method for the desired outcome, rather than a statutory or policy change. A work group of system stake-

holders had input into the drafting of this regulatory change.

30-60-18. Coordination and community involvement. This regulation is being amended to specify the public and private agencies in which the CMHC must establish cooperative working relationships in order to facilitate the coordination of service provision.

Economic Impact: None.

Bearer of Cost: None.

Affected Parties: Consumers and CMHCs.

Other Methods: This was determined the most appropriate method for the desired outcome, rather than a statutory or policy change. A work group of system stakeholders had input into the drafting of this regulatory change.

30-60-19. Data and statistical reporting. This regulation is being amended for only technical changes in nature (typographical, etc.) and such corrections do not affect policy.

Economic Impact: None. Bearer of Cost: None. Affected Parties: None.

30-60-25. Governing or advisory board; powers; bylaws. This regulation is being amended to specify the requirement for CMHC board membership to include a person who has experienced a severe and persistent mental illness and a family member of child or adolescent who has experienced a severe emotional disturbance.

Economic Impact: None.

Bearer of Cost: None.

Affected Parties: Consumers and CMHCs.

Other Methods: This was determined the most appropriate method for the desired outcome, rather than a statutory or policy change. A work group of system stakeholders had input into the drafting of this regulatory change.

30-60-26. Conflict of interest prohibited. This regulation is being amended to add the requirement for prohibition of conflict of interest for ACMHSPs.

Economic Impact: None.

Bearer of Cost: None.

Affected Parties: CMHCs and ACMHSPs.

Other Methods: This was determined the most appropriate method for the desired outcome, rather than a statutory or policy change. A work group of system stakeholders had input into the drafting of this regulatory change.

30-60-27. Annual audit. This regulation is being amended for only technical changes in nature (typographical, etc.) and such corrections do not affect policy.

Economic Impact: None. Bearer of Cost: None. Affected Parties: None.

30-60-28. Mission and vision statements; strategic plan; coordination with quality improvement program. This regulation is being amended to update and simplify language to include requirements for mission statement,

vision statement, strategic plan and coordination with quality improvement activities.

Economic Impact: None. Bearer of Cost: None. Affected Parties: CMHCs.

Other Methods: This was determined the most appropriate method for the desired outcome, rather than a statutory or policy change. A work group of system stakeholders had input into the drafting of this regulatory change.

30-60-29. Affiliation agreement; notice to secretary of a center's refusal to enter into; investigation and recommendations; no agreement imposed. This regulation is being added to require CMHCs to have a written affiliation agreement with each licensed ACMHSP and with each CMHC licensed in accordance with the exception provided for in K.S.A. 75-3307 (b). The regulation requires certain elements to be contained in the affiliation agreements and notification to the secretary of a CMHC's refusal to enter into an affiliation agreement. Upon notification the secretary may choose to investigate the circumstances of the refusal and may make recommendations, but will not impose an affiliation agreement upon a CMHC.

Economic Impact: None. Bearer of Cost: None.

Affected Parties: CMHCs and ACMHSPs.

Other Methods: This was determined the most appropriate method for the desired outcome, rather than a statutory or policy change. A work group of system stakeholders had input into the drafting of this regulatory change.

30-60-30. Solicitation and consideration of consumer comments and suggestions. This regulation is being added to require the CMHC to formally and informally solicit comments and suggestions from consumers served by the CMHC and any affiliated provider of the CMHC. This regulation is important in ensuring that consumer input is utilized in identifying strengths of the organization as well as areas that need improvement within the organization.

Economic Impact: None.

Bearer of Cost: None.

Affected Parties: Consumers and CMHCs.

Other Methods: This was determined the most appropriate method for the desired outcome, rather than a statutory or policy change. A work group of system stakeholders had input into the drafting of this regulatory change.

30-60-40. Personnel. This regulation is being amended to require CMHCs and ACMHSPs to ensure professional and other staff meet any training requirements that may be required by the division.

Economic Impact: None. Bearer of Cost: None.

Affected Parties: CMHCs and ACMHSPs.

Other Methods: This was determined the most appropriate method for the desired outcome, rather than a statutory or policy change. A work group of system stake-

holders had input into the drafting of this regulatory change.

30-60-41. Personnel policies and procedures. This regulation is being amended to add personnel policy and procedure requirements for ACMHSPs. The regulation also adds a requirement for CMHCs and ACMHSPs to abide by division guidelines when a consumer is employed by a CMHC or ACMHSP.

Economic Impact: None. Bearer of Cost: None.

Affected Parties: CMHCs and ACMHSPs.

Other Methods: This was determined the most appropriate method for the desired outcome, rather than a statutory or policy change. A work group of system stakeholders had input into the drafting of this regulatory change.

30-60-45. Administrative records. This regulation is being amended to add administrative record requirements for ACMHSPs.

Economic Impact: None.

Bearer of Cost: None.

Affected parties: CMHCs and ACMHSPs.

Other Methods: This was determined the most appropriate method for the desired outcome, rather than a statutory or policy change. A work group of system stakeholders had input into the drafting of this regulatory change.

30-60-46. Clinical records. This regulation is being amended to add clinical record requirements for ACMHSPs.

Economic Impact: None.

Bearer of Cost: None.

Affected Parties: CMHCs and ACMHSPs.

Other Methods: This was determined the most appropriate method for the desired outcome, rather than a statutory or policy change. A work group of system stakeholders had input into the drafting of this regulatory change.

30-60-47. Confidentiality and release of information. This regulation is being amended to add confidentiality and release of information requirements for ACMHSPs. The regulation adds a requirement for CMHC or ACMHSP staff to make reasonable effort to ensure that the authorization to release information is in proper form and appropriate before releasing confidential information.

Economic Impact: None.

Bearer of Cost: None.

Affected Parties: Consumers, CMHCs and ACMHSPs. Other Methods: This was determined the most appropriate method for the desired outcome, rather than a statutory or policy change. A work group of system stakeholders had input into the drafting of this regulatory change.

30-60-48. Behavior management. This regulation is being added to ensure basic standards for safety and protection of consumers when a CMHC or ACMHSP utilizes behavior management techniques.

Economic Impact: None.

Bearer of Cost: None.

Affected Parties: Consumers, CMHCs and ACMHSPs. Other Methods: This was determined the most appropriate method for the desired outcome, rather than a statutory or policy change.

30-60-49. Transportation. This regulation is being added to ensure basic standards for safety and protection of consumers and staff when a CMHC or ACMHSP provides transportation for consumers.

Economic Impact: None anticipated. Many if not all CMHCs and ACMHSPs will already meet these requirements.

Bearer of Cost: None.

Affected Parties: Consumers, CMHCs and ACMHSPs. Other Methods: This was determined the most appropriate method for the desired outcome, rather than a statutory or policy change.

30-60-50. Statement of rights; distribution; adherence to. This regulation is being amended to create additional consumer rights and to ensure that CMHCs and ACMHSPs make consumers aware of their rights at intake and at least annually.

Economic Impact: None. Bearer of Cost: None.

Affected Parties: Consumers, CMHCs and ACMHSPs.

Other Methods: This was determined the most appropriate method for the desired outcome, rather than a statutory or policy change. A work group of system stakeholders had input into the drafting of this regulatory change.

30-60-51. Complaints; review; appeals; procedures; records. This regulation is being added to establish a process in which dissatisfied consumers may make a complaint to the CMHC. The regulation includes timelines for the CMHC and/or ACMHSP to review and respond to consumer complaints and includes an appeal process for those situations in which complaint resolution between the CMHC and consumer can not be accomplished.

Economic Impact: Not capable of determination at this time. The primary economic impact would be upon SRS and CMHCs in workload of staff having to ensure timelines are met and staff participation in appeal processes. This will depend upon the number of complaints and the number of complaints that are unable to be resolved.

Bearer of Cost: SRS and CMHCs.

Affected Parties: SRS, CMHCs, ACMHSPs and consumers.

Other Methods: This was determined the most appropriate method for the desired outcome, rather than a statutory or policy change. A work group of system stakeholders had input into the drafting of this regulatory change.

30-60-55. Quality improvement program; records. This regulation is being amended to better define the quality improvement process. The regulation requires that consumer satisfaction information and risk management information be included in the CMHCs quality improvement program.

Economic Impact: None.

Bearer of Cost: None.

Affected Parties: CMHCs and ACMHSPs.

Other Methods: This was determined the most appropriate method for the desired outcome, rather than a statutory or policy change. A work group of system stakeholders had input into the drafting of this regulatory change.

30-60-56. Risk management program; records. This regulation is being added to identify information that is required to be reviewed and evaluated in the CMHC's risk management program.

Economic Impact: None.

Bearer of Cost: None.

Affected Parties: CMHCs and ACMHSPs.

Other Methods: This was determined the most appropriate method for the desired outcome, rather than a statutory or policy change. A work group of system stakeholders had input into the drafting of this regulatory change.

30-60-57. Utilization review program; records. This regulation is unchanged. Location of the regulation has been moved in order to better identify these requirements separate from risk management requirements.

Economic Impact: None.

Bearer of Cost: None.

Affected Parties: CMHCs and ACMHSPs.

Other Methods: This was determined the most appropriate method for the desired outcome, rather than a statutory or policy change. A work group of system stakeholders had input into the drafting of this regulatory change.

30-60-60. Required service programs. This regulation is being revoked. Required service programs are included in K.A.R. 30-60-64.

Economic Impact: None. Bearer of Cost: None. Affected Parties: None.

Other Methods: This was determined the most appropriate method for the desired outcome, rather than a statutory or policy change. A work group of system stakeholders had input into the drafting of this regulatory change.

30-60-61. Required service to target population members; denial of services to other persons. This regulation is being revoked. Denial of services requirements are included in K.A.R. 30-60-16.

Economic Impact: None. Bearer of Cost: None.

Affected Parties: None.

Other Methods: This was determined the most appropriate method for the desired outcome, rather than a statutory or policy change. A work group of system stakeholders had input into the drafting of this regulatory change.

30-60-62. Basic service delivery standards; service components. This regulation is being amended to add necessary components to the intake assessment, treatment planning, progress notes, regular reviews and dis-

charge planning. Changes include requirements for CMHCs and ACMHSPs to show evidence of consumer's participation in treatment planning, on-going review of progress and discharge planning.

Economic Impact: None.

Bearer of Cost: None.

Affected Parties: Consumers, CMHCs and ACMHSPs.

Other Methods: This was determined the most appropriate method for the desired outcome, rather than a statutory or policy change. A work group of system stakeholders had input into the drafting of this regulatory change.

30-60-63. Timeliness of response; requirements; documentation when unable to comply; referral to quality improvement program. This regulation is being added to create standards for CMHCs response time to emergency, urgent and routine situations. If a CMHC is unable to respond within the specified time lines, CMHC staff shall document the reason(s) why the CMHC was unable to comply with time lines.

Economic Impact: None.

Bearer of Cost: None.

Affected Parties: Consumers and CMHCs.

Other Methods: This was determined the most appropriate method for the desired outcome, rather than a statutory or policy change. A work group of system stakeholders had input into the drafting of this regulatory change.

30-60-64. Required basic community support services. This regulation is being amended to add basic community based support services and case management for children, adolescents and their families. This regulation also adds a more detailed description of the tasks that are to be included in case management services for adults, children and adolescents.

Economic Impact: None.

Bearer of Cost: None.

Affected Parties: Consumers and CMHCs.

Other Methods: This was determined the most appropriate method for the desired outcome, rather than a statutory or policy change. A work group of system stakeholders had input into the drafting of this regulatory change.

30-60-70. Optional services. This regulation is being amended to require a contractor to meet applicable requirements if providing optional services through a contract with a CMHC or ACMHSP.

Economic Impact: None.

Bearer of Cost: None.

Affected Parties: CMHCs, ACMHSPs and contractors.

Other Methods: This was determined the most appropriate method for the desired outcome, rather than a statutory or policy change. A work group of system stakeholders had input into the drafting of this regulatory change.

30-60-71. Alcohol and substance abuse services. This regulation is being amended to include requirements for ACMHSPs and CMHC contractors who provide alcohol and substance abuse services.

Economic Impact: None.

Bearer of Cost: None.

Affected Parties: CMHCs, ACMHSPs and contractors.

Other Methods: This was determined the most appropriate method for the desired outcome, rather than a statutory or policy change. A work group of system stakeholders had input into the drafting of this regulatory change.

30-60-72. Acute care services. This regulation is being amended to include requirements for CMHC contractors who provide acute care services.

Economic Impact: None.

Bearer of Cost: None.

Affected Parties: CMHCs and contractors.

Other Methods: This was determined the most appropriate method for the desired outcome, rather than a statutory or policy change. A work group of system stakeholders had input into the drafting of this regulatory change.

30-60-73. Partial or day hospitalization services. This regulation is being amended to include requirements for ACMHSPs and CMHC contractors who provide partial hospital services. The regulation adds a requirement for these services to meet the requirements of SRS Medicaid regulations.

Economic Impact: None.

Bearer of Cost: None.

Affected Parties: CMHCs, ACMHSPs and contractors. Other Methods: This was determined the most appropriate method for the desired outcome, rather than a statutory or policy change. A work group of system stakeholders had input into the drafting of this regulatory

change.

30-60-74. Residential treatment services. This regulation is being amended to include residential treatment service requirements for ACMHSPs and CMHC contractors who provide this service. The regulation adds a requirement for these facilities to be separately licensed or inspected as required by the division or Kansas Department of Health and Environment.

Economic Impact: None.

Bearer of Cost: None.

Affected Parties: CMHCs, ACMHSPs and contractors.

Other Methods: This was determined the most appropriate method for the desired outcome, rather than a statutory or policy change. A work group of system stakeholders had input into the drafting of this regulatory change.

30-60-75. Home-based intervention programs regulation is deleted. The regulation is no longer needed as the requirements for providing home- or community-based services are included in K.A.R. 30-60-64.

Economic Impact: None.

Bearer of Cost: None.

Affected Parties: CMHCs and ACMHSPs.

Other Methods: This was determined the most appropriate method for the desired outcome, rather than a statutory or policy change. A work group of system stakeholders had input into the drafting of this regulatory change.

30-60-76. Research programs. This regulation is being amended to include research program requirements for ACMHSPs and CMHC contractors.

Economic Impact: None.

Bearer of Cost: None.

Affected Parties: CMHCs, ACMHSPs, contractors and consumers.

Other Methods: This was determined the most appropriate method for the desired outcome, rather than a statutory or policy change. A work group of system stakeholders had input into the drafting of this regulatory change.

Article 61.—PARTICIPATING COMMUNITY MENTAL HEALTH CENTERS-CMHC

30-61-1. Scope. This regulation is being amended to specify that regulations in article 61 shall apply to CMHCs licensed in accordance with article 60 that desire to enter into a contract with the secretary for the purposes of being a participating community mental health center.

Economic Impact: None.

Bearer of Cost: None.

Affected Parties: Participating CMHCs.

Other Methods: This was determined the most appropriate method for the desired outcome, rather than a statutory or policy change. A work group of system stakeholders had input into the drafting of this regulatory change.

30-61-2. Definitions. This regulation is being amended to provide definitions of participating community mental health center and target populations.

Economic Impact: None.

Bearer of Cost: None.

Affected Parties: Participating CMHCs.

Other Methods: This was determined the most appropriate method for the desired outcome, rather than a statutory or policy change. A work group of system stakeholders had input into the drafting of this regulatory change.

30-61-5. Annual contracts; application; plan for compliance; term. This regulation is being amended to specify that any CMHC desiring to be a participating community mental health center shall apply to the secretary for a contract and shall remain in compliance with the requirements of article 61.

Economic Impact: None. Bearer of Cost: None.

Affected Parties: Participating CMHCs.

Other Methods: This was determined the most appropriate method for the desired outcome, rather than a statutory or policy change. A work group of system stakeholders had input into the drafting of this regulatory change.

30-61-6. Preference for licensed service area center; secretary's right to contract with another licensed center. This regulation is being amended to specify the conditions in which the secretary may enter into a contract with another CMHC.

Economic Impact: None. Bearer of Cost: None.

Affected Parties: Participating CMHCs.

Other Methods: This was determined the most appropriate method for the desired outcome, rather than a statutory or policy change. A work group of system stakeholders had input into the drafting of this regulatory change.

30-61-10. Screening and gatekeeping services. This regulation is being amended to add a requirement for the participating CMHC to provide follow-up services as necessary to persons determined by a QMHP as not needing admission to a state psychiatric hospital.

Economic Impact: None.

Bearer of Cost: None.

Affected Parties: Participating CMHCs.

Other Methods: This was determined the most appropriate method for the desired outcome, rather than a statutory or policy change. A work group of system stakeholders had input into the drafting of this regulatory change.

30-61-11. Liaison services. This regulation is being added to require participating CMHCs to designate staff who shall act as a liaison to persons admitted to the state psychiatric hospital. The liaison staff shall participate in discharge planning of each person admitted to the state psychiatric hospital and shall coordinate community services to facilitate the return of the person to the community.

Economic Impact: None. The liaison function is already a requirement specified in contracts with participating

Bearer of Cost: None.

Affected Parties: Participating CMHCs.

Other Methods: This was determined the most appropriate method for the desired outcome, rather than a statutory or policy change. A work group of system stakeholders had input into the drafting of this regulatory change.

30-61-15. Enhanced community support services. This regulation is being amended to be applicable to children, adolescents and adults. A requirement is added for the provision of attendant care services.

Economic Impact: None.

Bearer of Cost: None.

Affected Parties: Participating CMHCs.

Other Methods: This was determined the most appropriate method for the desired outcome, rather than a statutory or policy change. A work group of system stakeholders had input into the drafting of this regulatory change.

30-61-16. Community support services for children and adolescents regulation is deleted. Requirements for children and adolescent community support services are included in 30-60-64.

Economic Impact: None.

Bearer of Cost: None.

Affected Parties: CMHCs.

Other Methods: This was determined the most appropriate method for the desired outcome, rather than a statutory or policy change. A work group of system stakeholders had input into the drafting of this regulatory change.

> Janet Schalansky Secretary of Social and Rehabilitation Services

Department of Transportation

Notice to Contractors

Sealed proposals for the construction of road and bridge work in the following Kansas counties will be received at the Bureau of Construction and Maintenance, KDOT, Topeka, or at the Capitol Plaza Hotel, Topeka, until 2 p.m. July 17 and then publicly opened:

District One - Northeast

Douglas—23 C-3472-01 - County road 0.5 mile (0.8 kilometer) east of Stull then east 2.5 miles (4 kilometers), grading, bridge and surfacing. (Federal Funds)

Jefferson—237-44 K-9007-01 - K-237 from the junction of U.S 24 north to Perry State Park, 3.3 miles (5.4 kilometers), sealing. (State Funds)

Johnson—435-46 K-7865-01 - I-435 from the junction of K-10 north to 87th Street, 2 miles (3.2 kilometers), pavement patching. (State Funds)

Leavenworth—32-52 K-8425-01 - K-32 at Park, Main and Bowen Streets in Linwood, 0.2 mile (0.4 kilometer), grading and surfacing. (State Funds)

Leavenworth—5-52 K-8347-01 - K-5, Nine Mile Creek and Seven Mile Creek, bridge repair. (State Funds)

Lyon—57-56 K-8622-01 - K-57 and South Avenue in the City of Emporia, traffic signals. (State Funds)

Lyon—56 K-8417-01 - Interchange of Weaver Street and South Avenue in Emporia, pavement reconstruction. (State Funds)

Pottawatomie—75 C-3812-01 - County road 7 miles (11.3 kilometers) north of Belvue, grading, bridge and surfacing. (Federal Funds)

Shawnee—89 U-1883-01 - Sixth Street and Deer Creek Trafficway in Topeka, intersection improvement. (Federal Funds)

Wyandotte—435-105 K-7866-01 - I-435 from Kansas Avenue to the Kansas-Missouri state line, 8 miles (13 kilometers), pavement patching. (State Funds)

Wyandotte—5-105 K-8694-01 - 23rd Street bridge over K-5, bridge repair. (State Funds)

Wyandotte—32-105 K-9008-01 - K-32 from the junction of K-7 east to the K-7 northbound ramp, 0.4 mile (0.6 kilometer), overlay. (State Funds)

Wyandotte—70-105 K-8915-01 - I-70 between I-435 and U.S. 69, 6.4 miles (10.3 kilometers), pavement patching. (State Funds)

District Two - Northcentral

Cloud—81-15 K-9009-01 - Various locations on U.S. 81, 9.7 miles (15.6 kilometers), sealing. (State Funds)

Ellsworth—141-27 K-8944-01 - K-141 from the junction of K-4 north to the junction of K-140, 13.5 miles (21.6 kilometers), crack repair. (State Funds)

Geary—57-31 K-8717-01 - K-57 bridges over Dry Creek Drainage, bridge painting. (State Funds)

McPherson—135-59 K-8890-01 - I-135 from 6 miles (9.6 kilometers) north of the junction of U.S. 56 north to the McPherson-Saline county line, 10 miles (16.2 kilometers), sealing. (State Funds)

McPherson—59 C-3537-01 - County road 1 mile (1.6 kilometers) south and 2.5 miles (4 kilometers) east of Inman, 0.2 mile (0.3 kilometer), grading, bridge and surfacing. (Federal Funds)

Ottawa—81-72 K-8869-01 - U.S. 81, 1.6 miles (2.5 kilometers) south of the junction of K- 106 north to the Ottawa-Cloud county line, 14.5 miles (23.3 kilometers), pavement patching. (State Funds)

Republic—148-79 K-8719-01 - K-148 Turkey Creek bridge, bridge painting. (State Funds)

Saline—70-85 K-8884-01 - I-70 from the Lincoln-Saline county line east 8 miles (12.9 kilometers), sealing. (State Funds)

District Three - Northwest

Ellis—26 C-3629-01 - County road 0.5 mile (0.8 kilometer) north and 0.3 mile (0.5 kilometer) east of Ellis, grading, bridge and surfacing. (Federal Funds)

Smith—2 C-3735-01 - County road 0.5 mile (0.8 kilometer) south and 2 miles (3.2 kilometers) west of Claudell, 0.2 mile (0.3 kilometer), grading and bridge. (Federal Funds)

District Four - Southeast

Anderson-Bourbon-Linn—31-106 K-8948-01 - K-31 from the south junction of U.S. 59 east to the Anderson-Allen county line; K-31 from the Linn-Bourbon county line south to the junction of K-65; K-31 from the Anderson-Linn county line east and south to the Linn-Bourbon county line, 23.6 miles (38.1 kilometers), sealing. (State Funds)

Bourbon—69-6 K-8618-01 - U.S. 69 and 3rd Street and U.S. 69 and 6th Street in Fort Scott, traffic signals. (State Funds)

Cherokee—7-11 K-7718-01 - K-7 and Bethlehem Road intersection in Columbus, 0.2 mile (0.4 kilometer), intersection improvement. (State Funds)

Crawford—126-19 K-8994-01 - K-126 from the east city limits of Pittsburg east to the Kansas-Missouri state line, 2.8 miles (4.5 kilometers), sealing. (State Funds)

Greenwood—99-37 K-8732-01 - K-99 bridge over Bernard Creek, 5.5 miles (8.8 kilometers) north of the junction of U.S. 54, bridge repair. (State Funds)

Greenwood—99-37 K-9010-01 - K-99 from the east junction of U.S. 400 north to the west junction of U.S. 54, 12.9 miles (20.8 kilometers), sealing. (State Funds)

District Five - Southcentral

Barber—281-4 K-4051-03 - U.S. 281, approximately 7 miles (11.3 kilometers) north of Medicine Lodge, channel and inlet construction. (State Funds)

Butler—54-8 K-8736-01 - U.S. 54 Turkey Creek, bridge repair. (State Funds)

Butler—177-8 K-8743-01 - K-177 bridge over the Burlington Northern and Santa Fe Railroad and Durechen Creek, bridge repair. (State Funds)

Cowley—160-18 K-8742-01 - U.S. 160, Spring Creek bridge, bridge repair. (State Funds)

Edwards—24 C-3690-01 - County road 8 miles (12.9 kilometers) south of Belpre, then south 4.3 miles (6.9 kilometers) surfacing. (Federal Funds)

Harper—160-39 K-8812-01 - U.S. 160 from the Barber-Harper County line east to the junction of K-2, 17.6 miles (28.3 kilometers), sealing. (State Funds)

Pratt-Stafford—106 K-8822-01 - U.S. 54 from the east city limits of Pratt east to the Pratt-Kingman county line; U.S. 281 from the north city limits of Pratt north to the Pratt-Stafford County line; U.S. 281 from the Pratt-Stafford county line north to the junction of U.S. 50, 34.6 miles (55.7 kilometers), sealing. (State Funds)

Reno—96-78 K-8986-01 - K-96, Nickerson Boulevard beginning at Yaggy Road to Cow Creek, 3.4 miles (5.5 kilometers), overlay. (State Funds)

Sedgwick—54-87 K-8367-01 - U.S. 54, pedestrian overpass over U.S. 54, bridge repair. (State Funds)

Sedgwick—135-87 K-8369-01 - Pedestrian overpass over I-135, bridge repair. (State Funds)

Sedgwick—54-87 K-8620-01 - U.S. 54 and 183rd Street east of Goddard, traffic signals. (State Funds)

Sedgwick—54-87 K-8737-01 - U.S. 54, Hydralic Avenue ramp, bridge repair. (State Funds)

Sedgwick—235-87 K-8744-01 - Northbound I-235 exit ramp to eastbound U.S. 54, bridge repair. (State Funds)

Sumner—81-96 K-8739-01 - U.S. 81 Slate Creek, bridge repair. (State Funds)

District Six - Southwest

Ford-Gray—56-106 K-8879-01 - U.S. 56 from the Gray-Ford county line northeast to the west junction of U.S. 283; U.S. 56 from the Haskell-Gray county line northeast to the Gray-Ford county line, 37.7 miles (60.6 kilometers), sealing. (State Funds)

Proposals will be issued upon request to all prospective bidders who have been prequalified by the Kansas Department of Transportation on the basis of financial condition, available construction equipment and experience. Also, a statement of unearned contracts (Form No. 284) must be filed. There will be no discrimination against anyone because of race, age, religion, color, sex, handicap or national origin in the award of contracts.

Each bidder shall file a sworn statement executed by or on behalf of the person, firm, association or corporation submitting the bid, certifying that such person, firm, association or corporation has not, either directly or indirectly, entered into any agreement, participated in any collusion, or otherwise taken any action in restraint of free competitive bidding in connection with the submitted bid. This sworn statement shall be in the form of an affidavit executed and sworn to by the bidder before a person who is authorized by the laws of the state to administer oaths. The required form of affidavit will be provided by the state to each prospective bidder. Failure to submit the sworn statement as part of the bid approval package will make the bid nonresponsive and not eligible for award consideration.

Plans and specifications for the projects may be examined at the office of the respective county clerk or at the KDOT district office responsible for the work.

E. Dean Carlson Secretary of Transportation

Doc. No. 028070

State of Kansas

Social and Rehabilitation Services Department on Aging

Notice of Final Nursing Facility Medicaid Rates for State Fiscal Year 2003, Methodology for Calculating Final Rates, and Rate Justifications; Response to Written Comments; and Notice of Intent to Amend the Medicaid State Plan

Under the Medicaid program, 42 U.S.C. 1396 et seq., the State of Kansas pays nursing facilities, nursing facilities for mental health, and hospital long-term care units (hereafter collectively referred to as nursing facilities) a daily rate for care provided to residents who are eligible for Medicaid benefits. The Secretary of Aging administers the Medicaid nursing facility services payment program on behalf of the Secretary of Social and Rehabilitation Services. As required by 42 U.S.C. 1396a(a)(13), as amended by Section 4711 of the Balanced Budget Act of 1997, P.L. No. 105-33, 101 Stat. 251, 507- 08 (August 5, 1997), the Budget Director for the Kansas Department of Social and Rehabilitation Services (SRS) and the Secretary of the Kansas Department on Aging (KDOA) are publishing the final Medicaid per diem rates for Medicaid-certified nursing facilities for state fiscal year 2003, the methodology underlying the establishment of the final nursing facility rates, and the justifications for those final rates. SRS and KDOA are also providing notice of the state's intent to submit proposed amendments to the Medicaid State Plan to the U.S. Department of Health and Human Services' Centers for Medicare and Medicaid Services (CMS) on or before September 30, 2002.

The following narrative explanation of the nursing facility (NF) and NF-Mental Health (NF-MH) reimbursement formula, contained in Exhibit A.1, is divided into two parts. Part One, Phase One describes the methodology for determining rates effective with service dates beginning July 1, 2002. Part One, Phase Two contains the portions of the nursing facility reimbursement methodology, that were published as proposed in the Kansas Register on April 25, 2002, but will not be implemented until January 1, 2003 or after but before July 1, 2003. Part Two contains the common reimbursement methodology that will be applied to rates determined under both Phase One and Phase Two.

In accordance with section 5(c) of House Substitute for Senate Bill 363, the implementation of the published nursing facility reimbursement methodology will be delayed for at least six months but for not more than 12 months from July 1, 2002. House Substitute for Senate Bill 363 also states that trending methods shall be instituted to provide inflationary increases to nursing facilities until implementation of the published rules and regulations.

Based on the budget allocation for state fiscal year 2003 and caseload estimates, it is projected that the Part One, Phase Two methodologies will be implemented during the third quarter of state fiscal year 2003. However, if there is a recision or allotment made to the current budget, or other factors arise that affect this projection, the implementation of the Phase Two methodologies could be delayed.

I. Methodology Used to Calculate Medicaid Per Diem Rates for Nursing Facilities.

In general, the state uses a prospective, cost-based, facility-specific rate-setting methodology to calculate nursing facility Medicaid per diem rates, including the rates listed in this notice. The state's rate-setting methodology is contained primarily in the following described documents and authorities and in the exhibits, attachments, regulations, or other authorities referenced in them:

- A. The following portions of the Kansas Medicaid State Plan maintained by SRS:
 - 1. Attachment 4.19D, Part I, Subpart C, Exhibit C-1, inclusive;
 - 2. Attachment 4.19D, Part I, Subpart D;
 - 3. Attachment 4.19D, Part I, Subpart E;
 - 4. Attachment 4.19D, Part I, Subpart F;
 - 5. Attachment 4.19D, Part I, Subpart I; and
 - 6. Attachment 4.19D, Part I, Subpart S.

B. SRS regulations set out in K.A.R. Article 30-10.

The text of those portions of the Medicaid State Plan identified above in sections IA.1-6, but not the documents, authorities and the materials incorporated into them by reference, were reprinted in the April 25, 2002 issue of the Kansas Register (pages 573-586). Subparts D, E, F, and S have not been changed from what was published in the April 25, 2002 Kansas Register and therefore are not republished in this notice. Readers should refer to that issue for a description of those portions of the state's methodology. Subpart C, Exhibit C-1, and Subpart I have been revised following the publication on April 25, 2002 and are included in this final notice.

Copies of the documents and authorities containing the state's rate-setting methodology are available upon written request. A request for copies will be treated as a request for public records under the Kansas Open Records Act, K.S.A. 45-215 et seq. The state will charge a fee for copies. Written requests for copies should be sent to:

Secretary of Aging New England Building, Second Floor 503 S. Kansas Ave. Topeka, KS 66603-3404 Fax (785) 296-0767

A.1 Attachment 4.19D, Part I, Subpart C, Exhibit C-1: Methods and Standards for Establishing Payment Rates for Nursing Facilities

The narrative explanation of the nursing facility (NF) and NF-Mental Health (NF-MH) reimbursement formula is divided into two parts. Part One describes the separate reimbursement methodologies for determining Phase One and Phase Two rates. Part Two contains the common reimbursement methodology that will be applied to both Phase One and Phase Two rates.

In accordance with section 5(c) of House Substitute for Senate Bill 363, the implementation of the published nursing facility reimbursement methodology will be delayed for at least six months but for not more than 12 months from July 1, 2002. House Substitute for Senate Bill 363 also states that trending methods shall be instituted to provide inflationary increases to nursing facilities until imple-

mentation of the published rules and regulations is complete.

PART ONE: PHASE ONE RATES

Phase One rates shall be effective with service dates beginning July 1, 2002. The calendar year 2000 cost reports will be used for Phase One rates unless it is a first year historic or projected cost report. The Phase One rates shall remain in effect for at least six months but for not more than 12 months from July 1, 2002. The Phase One reimbursement methodology is divided into five sections as described below and in Part Two.

1) Allowable Per Diem Costs

Providers Enrolled Prior to July 1, 2002:

For providers enrolled in the Medicaid program prior to July 1, 2002, the per diem costs before limits for each of the four cost centers; Administration, Plant Operating, Room and Board, and Health Care, in effect June 30, 2002 shall be trended forward twelve months. This will inflate these values from the midpoint of the state fiscal year (SFY) 2002 (December 31, 2001) through the midpoint of SFY 2003 (December 31, 2002). The trending factor will be based on the Data Resources, Inc.- WEFA, National Skilled Nursing Facility Market Basket (DRI) Index. The allowed cost for each cost center shall be the lesser of the trended per diem costs and the trended cost center limit. The total allowed cost shall be the total of the allowed cost for each of the four cost centers.

<u>Providers Filing Projected or First Historical Cost Reports:</u>

The filing of projected cost reports will be limited to: 1) newly constructed facilities; 2) existing facilities new to the Medicaid program; or, 3) a provider re-entering the program who has not actively participated or billed services for 24 months or more. Per diem costs for each provider filing a projected cost report shall be determined from that report. The time period for the projected cost report shall be determined in accordance with Exhibit A-5 (K.A.R. 30-10-17).

For providers that complete their first 12 months of operation in the Medicaid program on or after June 16, 2002, but before June 30, 2003, the per diem costs for each cost center shall be determined from the first historical cost report. That report shall cover a time period determined in accordance with Exhibit A-5 (K.A.R. 30-10-17).

For providers filing either a projected or first historical cost report, the per diem costs before limits for each cost center will be determined by dividing the allowable resident related expenses in each cost center by the total resident days provided during the cost report period. An owner/administrator limitation will be applied in determining the allowable expenses. That limitation will be explained in detail in a subsequent section.

The per diem costs before limits will be trended forward from the midpoint of the cost report period through the midpoint of SFY 2003 (December 31, 2002). The trending factor will be based on the Data Resources, Inc.-WEFA, National Skilled Nursing Facility Market Basket (DRI) Index. The allowed cost for each cost center shall be the lesser of the trended per diem costs and the

trended cost center limit. The total allowed cost shall be the total of the allowed cost for each of the four cost centers.

2) Reimbursement Limitations

Health Care Cost Center Upper Payment Limit:

The per diem cost limit for each provider in the Health Care cost center will be adjusted quarterly for the provider's case mix and then trended forward. Each provider's case mix will be quantified by calculating a facility-specific average case mix index (CMI). The base limit for the Health Care cost center in effect on June 30, 2002, \$67.15, will be multiplied by the facility-specific average CMI to produce a facility specific per diem cost limit. That per diem cost limit will then be trended forward 12 months, to December 31, 2002, based on a factor determined from the DRI Index. For example, a nursing home with an average CMI of 2.00 will have a Health Care cost center per diem cost limit of \$134.30 before trending, or \$67.15 x 2.00. The per diem cost limit of \$134.30 will then be trended forward with the trending factor determined from the DRI index. Each quarter, the provider will receive the lower of the trended cost limit or their trended

The facility-specific average CMI will be determined using CMI scores obtained for each resident of the facility based on the Resource Utilization Group (RUG), Version III classification system and the most current Minimum Data Set (MDS) assessment. Exhibit C-2, page 8, contains the case mix index table effective July 1, 2001, that will be used to determine CMI scores for each RUG classification.

The MDS assessment data used in the quarterly CMI calculation will be cut off on the first day of the second month prior to the start of each quarter. The table below lists the cut off dates for each quarterly calculation.

Rate Effective Date:	Cut Off Date:
July 1	May 1
October 1	August 1
January 1	November 1
April Í	February 1

Plant Operating Cost Center Upper Payment Limit:

For providers enrolled in the Medicaid program prior to July 1, 2002, the Plant Operating cost center upper payment limit will be based on the per diem cost limit in effect on June 30, 2002. This limit will be trended forward 12 months to December 31, 2002 using a factor determined from the DRI index.

For providers filing a projected or first historical cost report, the Plant Operating cost center upper payment limit will be determined by subtracting the property allowance from the base Property limit of \$12.32 in effect on June 30, 2002. This limit will be trended forward 12 months to December 31, 2002 using a factor determined from the DRI index.

The Plant Operating cost center upper payment limit will be adjusted for any real and personal property fee rebase that becomes effective on or after July 1, 2002. The upper payment limit for the Plant Operating cost center will be reduced by the amount of any real and personal property fee rebase.

Administration and Room and Board Cost Center Upper Payment Limits:

The upper payment limits for the two remaining cost centers; Administration, and Room and Board, in effect on June 30, 2002 will be trended forward twelve months. This will inflate these values from the midpoint of the SFY 2002 (December 31, 2001) through the midpoint of SFY 2003 (December 31, 2002). The trending factor will be based on the DRI Index.

Owner/Related Party/Administrator/Co-Administrator Limit:

Since salaries and other compensation of owners are not subject to the usual market constraints, specific limitations are placed on the amounts reported. First, amounts paid to non-working owners and directors are not an allowable cost. Second, owners and related parties who perform resident-related services are limited to a salary chart based on the Kansas Civil Service classifications and wages for comparable positions. Owners and related parties who provide resident related services on less than a full-time basis will have their compensation limited by the percent of the total work time to a standard week. A workweek is defined as 40 hours. The owners and related parties must be professionally qualified to perform services which require licensure or certification.

The compensation paid to owners and related parties shall be allocated to the appropriate cost center for the type of service performed. Each cost center has an expense line for owner/related party compensation. There is also a cost report schedule titled, "Statement of Owners and Related Parties." This schedule requires information concerning the percent of ownership (if over five percent), the time spent in the function, the compensation, and a description of the work performed for each owner and/ or related party. Any salaries reported in the Plant Operating, Room and Board or Health Care cost centers in excess of the Kansas Civil Service based salary chart are transferred to the Administrative cost center where the excess is subject to the Owner/Related Party/Administrator/Co-Administrator per diem compensation limit.

For providers enrolled in the program prior to July 1, 2002, the Owner/Related Party/Administrator/Co-Administrator limitations in effect as of June 30, 2002 will continue to be applied for the Part One: Phase One rates.

For providers filing first year historical or projected cost reports, the Owner/Related Party/Administrator/Co-Administrator limitations will be determined using the tables included on pages 5 and 6 of Exhibit C-2.

3) Incentive Factors

An incentive factor in the form of a per diem add-on will be added to the total allowed cost. For providers enrolled in the program prior to July 1, 2002, the incentive factor will be equal to the incentive factor in effect on June 30, 2002.

For providers filing a projected or first historical cost report, the incentive factor will be determined using the total of the per diem cost for the Administration cost center and the Plant Operating cost center less the real and personal property taxes expense line. The per diem allow-

ance for these two cost centers less property taxes will be determined before the owner/related party/administrator/co-administrator limitation is applied. The per diem allowance will be compared to the table shown on page 4 of Exhibit C-2 to determine the incentive factor.

4) Real and Personal Property Fee

A real and personal property fee (RPPF) will be paid in lieu of all depreciation, mortgage interest, lease and amortization of lease expense. The RPPF will be a per diem amount added to the total allowed cost. For providers enrolled in the Medicaid program prior to July 1, 2002, the RPPF in effect on June 30, 2002 shall be trended forward twelve months using a factor based on the DRI index.

For providers that file a projected or first historical cost report, the real and personal property fee will be the total of the property allowance and value factor determined from the ownership costs submitted on the cost report. The property allowance will be determined by dividing the four ownership cost line items (mortgage interest, depreciation, lease and amortization of lease expense) by the total resident days reported on the cost report. The property value factor will be determined by comparing the calculated property allowance to an array of property allowances for all providers in effect on June 30, 2002. The property value factor will be a percentage add-on based on the following table.

Group #	Percentile Ranking	Add-on Percent
1	-0- through 25th percentile	45%
2	26th through 50th percentile	15%
3	51st through 75th percentile	7.5%
4	76th through 85th percentile	5%
5	86th through 100th percentile	0%

There will be a provision for rebasing the RPPF when capital expenditure thresholds are met (\$25,000 for homes under 51 beds and \$50,000 for homes over 50 beds). Rebasing of the RPPF is explained in greater detail in Exhibit A-14 (K.A.R. 30-10-25). The value factor will not change as a result of a rebased RPPF during the Phase One rate period.

5) Comparable Service Rate Limitation

For NF or NF-MH, the per diem rate for care shall not exceed the rate charged for the same type of service to residents not under the Kansas Medical Assistance Program. The comparable service rate limitation is explained in greater detail in Exhibit A-6 (K.A.R. 30-10-18).

PART ONE: PHASE TWO RATES

Phase Two rates shall be effective no sooner than six months but no later than 12 months from July 1, 2002. The calendar year 2001 cost reports will be used for Phase Two rates unless it is a first year historic or projected cost report. The Phase Two reimbursement methodology is divided into nine sections as described below and in Part Two.

1) Rate Determination

Medicaid rates for Kansas NFs and NFs-MH are determined using a prospective, facility-specific rate-setting system. The rate is based on costs from the latest cost report submitted by the provider. Computer software has

been developed and is used for calculating the facility specific payment rates.

The allowable expenses are divided into three cost centers. The cost centers are Operating, Indirect Health Care and Direct Health Care. They are defined in Exhibit A-6, (K.A.R. 30-10-18). NOTE: This differs from the cost report, which is divided into four cost centers. The cost report will be revised effective December 2002.

The allowable historic per diem cost is determined by dividing the allowable resident related expenses in each cost center by resident days. The allowable historic per diem cost is adjusted by an inflation factor. The resident days and inflation factors used in the rate determination will be explained in greater detail in the following sections.

The inflated allowable historic per diem cost for each cost center is then compared to the cost center upper payment limit. The allowable per diem rate is the lesser of the inflated allowable historic per diem cost in each cost center or the cost center upper payment limit. Each cost center has a separate upper payment limit. If each cost center upper payment limit is exceeded, the allowable per diem rate is the sum of the three cost center upper payment limits. There is also a separate upper payment limit for owner, related party, administrator, and co-administrator compensation. The upper payment limits will be explained in more detail in a separate section.

The case mix of the residents adjusts the Direct Health Care cost center. The theory behind a case mix payment system is that the characteristics of the residents in a facility rather than the characteristics of the facility should determine the payment rate. The idea is that certain resident characteristics can be used to predict future costs to care for residents with those same characteristics. For these reasons, it is desirable to use the case mix classification for each facility in adjusting provider rates.

There are add-ons to the allowable per diem rate. The add-ons consist of the incentive factor and the real and personal property fee. The incentive factor and real and personal property fee are explained in separate sections of this exhibit. The add-ons plus the allowable per diem rate equal the total per diem rate.

2) Quarterly Case Mix Index Calculation

Providers are required to submit to the agency the uniform assessment instrument, which is the Minimum Data Set (MDS), for each resident in the facility. The MDS assessments are maintained in a computer database.

The Resource Utilization Groups-III (RUG-III) Version 5.12b, 34 group, index maximizer model is used as the resident classification system to determine all case- mix indices, using data from the MDS submitted by each facility. Standard Version 5.12b case mix indices developed by the Health Care Financing Administration (now the Centers for Medicare and Medicaid) shall be the basis for calculating facility average case mix indices to be used to adjust the Direct Health Care costs in the determination of upper payment limits and rate calculation. Resident assessments that cannot be classified will be assigned the lowest CMI for the State. Page 8a of Exhibit C-2 contains the table listing the case mix indices for each RUG III grouping.

Each resident in the facility on the first day of each calendar quarter with a completed and submitted assess-

ment shall be assigned a RUG-III 34 group calculated on the resident's most current assessment available on the first day of each calendar quarter. This RUG-III group shall be translated to the appropriate CMI. From the individual resident case mix indices, three average case mix indices for each Medicaid nursing facility shall be determined four times per year based on the assessment information available on the first day of each calendar quarter

The facility-wide average CMI is the simple average, carried to four decimal places, of all resident case mix indices. The Medicaid-average CMI is the simple average, carried to four decimal places, of all indices for residents where Medicaid is known to be the per diem payer source on the first day of the calendar quarter. The private-pay average CMI is the simple average, carried to four decimal places, of all indices for residents where private pay is known to be the per diem payer source on the first day of the calendar quarter. Individuals for which Medicare is listed as a payer source are not included in the private pay average CMI calculation.

The resident listing cut off for calculating the average CMIs will be the first day of the quarter before the rate is determined. The following are the dates for the resident listings and the quarter in which the average Medicaid CMIs will be used in the quarterly rate-setting process.

Rate Effective Date:

July 1

October 1

January 1

April 1

October 1

April 1

January 1

April 1

April 1

The resident listings will be mailed to providers prior to the dates the quarterly case mix adjusted rates are determined. This will allow the providers time to review the resident listings and make corrections before they are notified of new rates. The cut off schedule may need to be modified in the event accurate resident listings and Medicaid CMI scores cannot be obtained from the MDS database.

3) Resident Days

The allowable historic per diem costs for the Direct Health Care cost center and for food and utilities in the Indirect Health Care cost center is determined by dividing the allowable resident related expenses by the actual resident days during the cost report period. The allowable historic per diem cost for the Operating and Indirect Health Care Cost Centers less food and utilities is subject to an 85% minimum occupancy rule. The greater of the actual resident days for the cost report period or the 85% minimum occupancy based on the number of licensed bed days during the cost report period are used as the total resident days in the rate calculation for the Operating cost center and the Indirect Health Care cost center less food and utilities. All licensed beds are required to be certified to participate in the Medicaid program.

There are two exceptions to the 85% minimum occupancy rule. The first is that it does not apply to a provider who is allowed to file a projected cost report for an interim rate. Both the rates determined from the projected cost report and the historic cost report covering the projected cost report period are based on the actual resident days for the period.

The second exception is for the first cost report filed by a new provider who assumes the rate of the previous provider. If the 85% minimum occupancy rule was applied to the previous provider's rate, it is also applied when the rate is assigned to the new provider. However, when the new provider files a historic cost report for the first 12 months of operation, the rate determined from the cost report will be based on actual days and not be subject to the 85% minimum occupancy rule. The 85% minimum occupancy rule is then reapplied to the rate when the new provider reports resident days and costs for the 13th month of operation and after.

4) Inflation Factors

Inflation will be applied to the allowable reported costs from the calendar year end cost reports for rates effective July 1st. The inflation will be based on the Data Resources, Inc.-WEFA, National Skilled Nursing Facility Market Basket Without Capital Index (DRI Index). The inflation will be applied from the midpoint of the cost report period to the midpoint of the payment rate period (July 1 through June 30).

The DRI Indexes listed in the latest available quarterly publication will be used to determine the inflation tables for the payment schedules processed during the payment rate period. This will require the use of forecasted factors in the inflation table. The inflation tables will not be revised until the next payment rate period.

For historic cost report periods ending other than the last month in a quarter, the inflation factor to be used in the calculation will be the factor for the quarter in which the cost reporting period ends. For example, a cost report period ended August 31st will receive inflation based on the calculation for a cost report period ended September 30. This approach is being used instead of trying to convert a quarterly index into monthly factors.

The Table, "Inflation For Report Year-End Prior To July 1" (Exhibit C-2, page 1) is applied in determining rates with an effective date of July 1. The Table, "Inflation For Report Year Ends After July 1" (Exhibit C-2, page 2) is applied in determining rates for non-calendar year historic cost reports with a rate effective date other than July 1.

The inflation factor is applied to all costs <u>except</u> the following:

- 1) Owner/Related Party Compensation
- Interest Expense
- 3) Real and Personal Property Taxes

5) Upper Payment Limits

There are three types of upper payment limits that will be described. One is the owner/related party/administrator/co-administrator limit. The second is the real and personal property fee limit. The last type of limit is an upper payment limit for each cost center. The upper payment limits are in effect during the payment rate period unless otherwise specified by a State Plan amendment.

Owner/Related Party/Administrator/Co-Administrator Limits:

Since salaries and other compensation of owners are not subject to the usual market constraints, specific limits are placed on the amounts reported. First, amounts paid to non-working owners and directors are not an allowa-

ble cost. Second, owners and related parties who perform resident related services are limited to a salary chart based on the Kansas Civil Service classifications and wages for comparable positions. Owners and related parties who provide resident related services on less than a full time basis have their compensation limited by the percent of their total work time to a standard work week. A standard work week is defined as 40 hours. The owners and related parties must be professionally qualified to perform services which require licensure or certification.

The compensation paid to owners and related parties shall be allocated to the appropriate cost center for the type of service performed. Each cost center has an expense line for owner/related party compensation. There is also a cost report schedule titled, "Statement of Owners and Related Parties." This schedule requires information concerning the percent of ownership (if over five percent), the time spent in the function, the compensation, and a description of the work performed for each owner and/ or related party. Any salaries reported in excess of the Kansas Civil Service based salary chart are transferred to the Operating cost center where the excess is subject to the Owner/Related Party/Administrator/Co-Administrator per diem compensation limit.

The Schedule C is an array of non-owner administrator and co-administrator salaries. The schedule includes the most current historic cost reports in the database from all active nursing facility providers. The salary information is not adjusted for inflation. The per diem data is calculated using an 85% minimum occupancy level for those providers in operation for more than twelve months. The Schedule C for the owner/related party/administrator/co-administrator per diem compensation limit is the first schedule run during the annual rate setting.

The Schedule C is used to set the per diem limitation for all non owner administrator and co-administrator salaries and owner/related party compensation in excess of the civil service based salary limitation schedule. The per diem limit for a 50- bed or larger home is set at the 90th percentile on all salaries reported for non-owner administrators and co-administrators. A limitation table is then established for facilities with less than 50 beds. This table begins with a reasonable salary per diem for an administrator of a 15-bed or less facility. A linear relationship is then established between the compensation of the administrator of the 15-bed facility and the compensation of the administrator of a 50-bed facility. The linear relationship determines the per diem limit for the facilities between 15 and 50 beds.

The per diem limits apply to the non-owner administrators and co-administrators and the compensation paid to owners and related parties who perform an administrative function or consultant type of service. The per diem limit also applies to the salaries in excess of the civil service based salary chart in other cost centers that are transferred to the operating cost center.

Real and Personal Property Fee Limit

The property component of the reimbursement methodology consists of the real and personal property fee that is explained in more detail in a later section. The upper payment limit will be 105% of the median determined from a total resident day-weighted array of the inflated property fees in effect as of June 1, 2002.

Cost Center Upper Payment Limits

The Schedule B computer run is an array of all per diem costs for each of the three cost centers-Operating, Indirect Health Care and Direct Health Care. The schedule includes the most recent historic cost report in the database from all active nursing facility providers. Projected cost reports are excluded from the database.

The per diem expenses for the Operating cost center and the Indirect Health Care cost center less food and utilities are subject to the 85% minimum occupancy rule for providers reporting costs for the 13th month of operation and after. All previous desk review and field audit adjustments are considered in the per diem expense calculations. The costs are adjusted by the owner/related party/administrator/co-administrator limit.

Prior to the Schedule B arrays, the cost data on certain expense lines are adjusted for historical and forecasted inflation, where appropriate. This will bring the costs reported by the providers to a common point in time for comparisons. The historic inflation will be based on the DRI Index for the cost center limits effective July 1st. This historic inflation factor will adjust costs from the midpoint of each providers cost report period to the latest quarterly DRI Index for the Schedule B processing.

The forecasted inflation factor will also be based on the DRI Index. Determination of the forecasted inflation factor will begin with the quarter the historic inflation ends. It will be continued to the midpoint of the payment rate period.

Certain costs are exempt from the inflation application when setting the upper payment limits. They include owner/related party compensation, interest expense, and real and personal property taxes.

The final results of the Schedule B run are the median compilations. These compilations are needed for setting the upper payment limit for each cost center. The median for each cost center is weighted based on total resident days. The upper payment limits will be set using the following:

Operating 110% of the median Indirect Health Care 115% of the median Direct Health Care 120% of the median

Direct Health Care Cost Center Limit:

The Kansas reimbursement methodology has a component for a case mix payment adjustment. The Direct Health Care cost center rate component and upper payment limit are adjusted by the facility average CMI.

For the purpose of setting the upper payment limit in the Direct Health Care cost center, the facility cost report period CMI and the statewide average CMI will be calculated. The facility cost report period CMI is the resident day-weighted average of quarterly facility-wide average case mix indices, carried to four decimal places. The quarters used in this average will be the quarters that most closely coincide with the financial and statistical reporting period. For example, a 01/01/20XX-12/31/20XX financial and statistical reporting period would use the facilitywide average case mix indices for quarters beginning 01/ 01/XX, 04/01/XX, 07/01/XX and 10/01/XX. The statewide average CMI is the resident day-weighted average, carried to four decimals, of the facility cost report period case mix indices for all Medicaid facilities calculated effective each payment rate period.

The statewide average CMI and facility cost report period CMI are used to set the upper payment limit for the Direct Health Care cost center. The limit is based on all facilities with a historic cost report in the database. There are three steps in establishing the base upper payment limit.

The first step is to normalize each facility's Direct Health Care inflated per diem cost to the statewide average CMI. The following will describe the normalization process. A facility has an average inflated per diem cost of \$60(**A**) and a facility cost report period CMI of $1.4000(\mathbf{B})$. The statewide average CMI is .9500(**C**). First, divide the statewide average CMI (**C**) by the facility cost report period CMI (**B**) (.9500/1.4000=.68). Second, the quotient is then multiplied by the average inflated per diem cost (**A**) to determine the normalized inflated cost at the statewide average CMI (\$60 x .68=\$40.80). Normalizing each facility's cost to the statewide average CMI ensures a level comparison of direct health care costs can be made when setting the upper payment limit.

The second step is to array the normalized inflated costs, based on the statewide average CMI, to determine the median. The median is located using a day-weighted methodology. That is, the median cost is the per diem cost for the facility in the array at which point the cumulative total of all resident days first equals or exceeds half the number of the total resident days for all providers. The facility with the median resident day in the array sets the median inflated direct health care cost. For example, if there are 8 million resident days, the facility in the array with the 4 millionth day would set the median.

The final step in calculating the base Direct Health Care upper payment limit is to apply the percentage factor to the median cost. For example, if the median cost is \$45 and the upper payment limit is based on 120% of the median, then the upper payment limit for the statewide average CMI would be \$54 (**D**=120% x \$45).

Once the base limit for the Direct Health Care cost center is established at the statewide average CMI, the base limit is adjusted by each facility's cost report period CMI to determine a facility specific Direct Health Care cost center upper payment limit. The following will describe the facility specific upper payment limit process. A facility has an average facility cost report period CMI of 1.4000(A). The statewide average CMI is .9500(B). First, divide the facility cost report period average CMI (A) by the statewide average CMI (B) (1.4000/.9500=1.47). Second, the statewide average CMI limit D (\$54) is multiplied by the quotient to determine the upper payment limit for the facility ($$54 \times 1.47 = 79.38). In the example above, the facility inflated Direct Health Care cost was \$60, which is less than the upper payment limit of \$79.38 for a facility average CMI of 1.4000.

6) Quarterly Case Mix Rate Adjustment

The allowance for the Direct Health Care cost component will be based on the average Medicaid CMI in the facility. The first step in calculating the allowance is to determine the lower of the inflated Direct Health Care cost or the facility's specific Direct Health Care upper payment limit. Using the example in the Upper Payment Limit section, the Direct Health Care cost of \$60 was less than the upper payment limit of \$79.38 for an average CMI of 1.4000.

The next step is to determine the Direct Health Care cost based on the Medicaid acuity. The Medicaid CMI is divided by the facility cost report period CMI. Using the example above, if the Medicaid average CMI is 1.6, it is divided by 1.4 to arrive at a quotient of 1.14 (1.6/1.4). The lower of the inflated per diem cost or the facility specific Direct Health Care upper payment limit is multiplied by the quotient to determine the Medicaid acuity adjusted allowable Direct Health Care cost. In the example, the allowable Medicaid acuity adjusted Direct Health Care cost will be \$68.40 (\$60 x 1.14).

For illustrative purposes, if the facility-specific upper payment limit had been \$55 for an average CMI of 1.4, the Medicaid rate would have been calculated using the upper payment limit since it was lower than the cost of \$60. In this situation, the allowable Medicaid acuity adjusted cost would be \$62.70 ($1.14 \times 55).

The Direct Health Care component of the Medicaid rate is adjusted quarterly for changes in the Medicaid CMI. Using the first example above, if the average Medicaid CMI increases from 1.6 to 1.7 the following quarter, the allowance for the Direct Health Care cost would increase from \$68.40 to \$72.60. The first step is to divide the new average Medicaid CMI by the facility cost report period CMI established for the rate year (July 1 through June 30) to determine the new quotient (1.7/1.4=1.21). The lower of the facility specific Direct Health Care upper payment limit or the inflated Direct Health Care per diem cost is multiplied by the new quotient to determine the Medicaid allowance. (1.21 x \$60=\$72.60).

Conversely, if the average Medicaid CMI decreases from 1.6 to 1.5 the following quarter, the allowance for the Direct Health Care cost would decrease from \$68.40 to \$64.20. Again, the first step is to divide the new average Medicaid CMI by the facility cost report period CMI established for the rate year (July 1 through June 30) to determine the new quotient (1.5/1.4=1.07). The lower of the facility specific Direct Health Care upper payment limit or the inflated Direct Health Care per diem cost is multiplied by the new quotient to determine the Medicaid allowance. $(1.07 \times $60=$64.20)$.

7) Real And Personal Property Fee

The property component of the reimbursement methodology consists of the real and personal property fee (property fee). The property fee is paid in lieu of an allowable cost of mortgage interest, depreciation, lease expense and/or amortization of leasehold improvements. The fee is facility specific and does not change as a result of a change of ownership, change in lease, or with reenrollment in the Medicaid program.

The original property fees were implemented January 1, 1985. The property fee was comprised of two components, a property allowance and a property value factor. Ownership costs for each provider was taken from the latest cost report the agency had processed through July 1984 and used to establish the property allowance. The property value factor was then determined from an array of the property allowances for each provider. Providers enrolled in the Medicaid program after January 1, 1985, for which a property fee had not previously been calculated, received a property fee determined from ownership costs reported on their first historical cost report.

All providers will receive a new property fee, effective July 1, 2002. The first step in determining a new facility-specific property fee will be to sum the property allowance and value factor. The second step is to apply an annual inflation factor to the new property fee, which consists of the combined property allowance and value factor. The third step is to compare the inflated property fee to the upper payment limit established for the property fee. The provider will receive the lower of the facility-specific inflated property fee or the upper payment limit.

For providers re-enrolling in the Kansas Medical Assistance program or providers enrolling for the first time but operating in a facility that was previously enrolled in the program, the property fee shall be the sum of the last effective property allowance and the last effective value factor for that facility. The property fee will be inflated and then compared to the upper payment limit. The property fee will be the lower of the facility- specific inflated

property fee or the upper payment limit.

Providers entering the Kansas Medical

Providers entering the Kansas Medical Assistance program for the first time, who are operating in a building for which a fee has not previously been established, shall have a property fee calculated from the ownership costs reported on the cost report. This fee shall include appropriate components for rent or lease expense, interest expense on real estate mortgage, amortization of leasehold improvements, and depreciation on buildings and equipment. The process for calculating the property fee for providers entering the Kansas Medical Assistance program for the first time is explained in greater detail in Exhibit A-14 (K.A.R. 30-10-25).

There is a provision for changing the property fee. This is for a rebasing when capital expenditure thresholds are met (\$25,000 for homes under 51 beds and \$50,000 for homes over 50 beds). The original property fee remains constant but the additional factor for the rebasing is added. The property fee rebasing is explained in greater detail in Exhibit A-14 (K.A.R. 30-10-25). The rebased property fee is subject to the upper payment limit.

8) Incentive Factor

The incentive factor is a per diem add-on ranging from zero to fifty cents. It is based on the per diem cost of the Operating cost center less the real and personal property taxes expense line. The per diem allowance for this cost center less property taxes is determined before the owner/related party/administrator/co-administrator limitation is applied.

The incentive is designed to encourage economy and efficiency in the operating cost center. Property taxes were excluded since the provider has little control over this cost. There is an inverse relationship between the incentive factor and the per diem cost used to determine it. The higher the per diem cost, the lower the incentive factor.

The Schedule E is an array of the per diem costs used to determine the incentive factor. The schedule includes costs from the most recent historical cost report for all active providers. No projected cost reports are included. The 85% occupancy rule is applied in determining the per diem costs. The costs are not adjusted for inflation.

The Schedule E summarizes all expense lines from the Operating cost center, less property taxes. The ownership costs are excluded from the array so that both older fa-

cilities (with relatively lower ownership costs) and newer facilities (with relatively higher ownership costs) can benefit from the incentive factor through efficient operations.

The total per diem costs for the operating cost center, less property taxes, are arrayed and percentiles established. These percentiles then become the basis for establishing the per diem cost ranges used to determine each provider's efficiency factor, consistent with agency policy. The ranges are defined as follows:

Providers Percentile	Incentive Factor
Ranking	Per Diem
-0- to 30th Percentile	\$.50
31st to 55th Percentile	.40
56th to 75th Percentile	.30
76th to 100th Percentile	-0-

9) Comparable Private Pay Rates

The last factor considered in determining a provider's Medicaid per diem payment rate is their private pay rate. Providers are reimbursed the lower of the calculated Medicaid rate or their private pay rate. The agency maintains a registry of private pay rates. It is the responsibility of the providers to send in private pay rate updates so that the registry is updated. When new Medicaid rates are determined, if the private pay rate reflected in the registry is lower, then the provider is held to that private pay rate until the provider sends notification that it has a higher private pay rate.

Case Mix Adjustments to Private Pay Rates:

Private pay rates submitted to the agency are adjusted up if a provider's average CMI for its private pay/other residents is lower than its Medicaid average CMI. This is accomplished by multiplying the provider's average private pay rate in the private pay registry by the ratio of their Medicaid average CMI to their average CMI for private pay. This ensures that providers' Medicaid rates are not limited to a lower private pay rate that may be attributed to the lower acuity of the private pay residents. There is no adjustment to private pay rates if the facility's Medicaid average CMI is less than its average CMI for the private pay/other residents. There is also no adjustment to private pay rates if the facility's total Medicaid rate is less than its average private pay rate.

PART TWO: PHASE ONE AND PHASE TWO COMMON REIMBURSEMENT METHODOLOGY

Part Two of the NF and NF-MH reimbursement formula narrative contains the common reimbursement methodology that will be applied to rates determined under Part One, Phase One and Phase Two. The Part Two reimbursement methodology is divided into three sections as described below.

1) Cost Reports

The Nursing Facility Financial and Statistical Report (MS2004) is the uniform cost report. It is included in Exhibit A-5 (K.A.R. 30-10-17). It organizes the commonly incurred business expenses of providers into four reimbursable cost centers (administration, plant operating, room and board, and health care). Ownership costs (i.e., mortgage interest, depreciation, lease and amortization of leasehold improvements) are reported but reimbursed through the real and personal property fee. There is a

non-reimbursable/non-resident related cost center so that total operating expenses can be reconciled to the providers accounting records.

All cost reports are desk reviewed by agency auditors. Adjustments are made, when necessary, to the reported costs in arriving at the allowable historic costs for the rate computations.

Calendar Year End Cost Reports:

All providers not on a projected rate or in the first year of operation are required to file the uniform cost report on a calendar year basis. The requirements for filing the calendar year cost report are found in Exhibit A-5 (K.A.R. 30-10-17).

When a non-arms length change of provider takes place or an owner of the real estate assumes the operations from a lessee, the facility will be treated as an ongoing operation. In this situation, the related provider or owner shall be required to file the calendar year end cost report. The new operator or owner is responsible for obtaining the cost report information from the prior operator for the months during the calendar year in which the new operator was not involved in running the facility. The cost report information from the old and new operators shall be combined to prepare a 12-month calendar year end cost report.

Projected Cost Reports:

The filing of projected cost reports are limited to: 1) newly constructed facilities; 2) existing facilities new to the Medicaid program; or 3) a provider re-entering the Medicaid program who has not actively participated or billed services for 24 months or more. The requirements are found in Exhibit A-5 (K.A.R. 30-10-17).

Historical Cost Report Covering Projected Cost Report Period or the First Year of Operation of a New Provider:

The cost report requirements are found in Exhibit A-5 (K.A.R. 30-10-17).

2) Rate Effective Date

Rate effective dates are determined in accordance with Exhibit A-7 (K.A.R. 30- 10-19). The rate may be revised for an add-on reimbursement factor (i.e., rebased property fee or 24-hour nursing), desk review adjustment or field audit adjustment.

3) Retroactive Rate Adjustments

Retroactive adjustments, as in a retrospective system, are made for the following three conditions:

A retroactive rate adjustment and direct cash settlement is made if the agency determines that the historic cost report data used to determine the prospective payment rate was in error. The prospective payment rate period is adjusted for the corrections.

If a projected cost report is approved to determine an interim rate, a settlement is also made after a historic cost report is filed for the same period.

And last, when a new provider, through an armslength transaction, is reimbursed the rate of the prior provider and files a historic cost report for the first 12 months of operation, a rate adjustment is made beginning with

the first day after the cost report period. For example, if the first historic cost report is filed for the 12 month period ended June 30, but the rate from the cost report is not entered into the payment system until October 1, then there will be a retroactive rate adjustment from July 1 through September 30.

All settlements are subject to upper payment limits. A provider is considered to be in projection status if they are operating on a projected rate and they are subject to the retroactive rate adjustment.

A.5 Attachment 4.19D, Part I, Subpart I: Determining a rate for a ventilator-dependent resident in a nursing facility

The following are the policies and procedures for determining a rate for a ventilator-dependent resident in a nursing facility.

- (1) The request for additional reimbursement for a ventilator-dependent resident shall be submitted to the Kansas Department of Social and Rehabilitation Services (SRS) or the Kansas Department on Aging (KDOA) in writing for prior approval. Each request must include a current care plan for the resident, the most current Minimum Data Set (MDS) resident assessment and an itemized budget for implementing the care plan. The itemized expenses shall not include the cost of durable medical equipment (DME) reimbursed in accordance with the DME program in the Kansas Medical Assistance Programs Manual.
- (2) All of the following criteria shall be present in order for a resident to be considered ventilator dependent:
 - (A) The resident shall not be able to breathe without mechanical ventilation.
 - (B) The resident shall use the ventilator for life support, 24 hours a day, seven days a week.
 - (C) The resident shall have a tracheostomy or endotracheal tube.
- (3) The provider shall be reimbursed the Kansas Medical Assistance Program daily rate determined for the nursing facility plus an additional per diem amount approved by SRS and KDOA for the ventilator-dependent resident. The additional reimbursement shall be prior authorized by SRS and KDOA. The provider shall submit a budget with the detail of the expenditures requested to care for the ventilator-dependent resident. The reimbursement shall be negotiated based on the prevailing cost of the individualized care plan and subject to an upper payment limit.

The upper payment limit shall be the rate from the Medicare Prospective Payment System (PPS) for skilled nursing facilities as based on the MDS assessment and using the Resource Utilization Groups Version III (RUGs III) classification system. All 44 classifications in the RUGs III system will be used to determine the corresponding Medicare PPS per diem rate.

(4) No additional amount above the current daily rate shall be allowed until the service is prior authorized by SRS and KDOA.

- (5) The criteria shall be reviewed quarterly to determine if the resident continues to be ventilator-dependent. If a resident is no longer ventilator-dependent, the provider shall not receive additional reimbursement beyond the Kansas Medical Assistance Program per diem rate determined for the facility.
- (6) The additional reimbursement for the ventilator-dependent resident shall be offset to the cost center of benefit on the nursing facility financial and statistical report.

II. Final Medicaid Per Diem Rates for Kansas Nursing Facilities.

In accordance with section 5(c) of House Substitute for Senate Bill 363, the implementation of the published nursing facility reimbursement methodology will be delayed for at least six months but for not more than 12 months from July 1, 2002. House Substitute for Senate Bill 363 also states that trending methods shall be instituted to provide inflationary increases to nursing facilities until implementation of the published rules and regulations is complete.

Based on this legislative direction, Phase One rates shall be effective with service dates beginning July 1, 2002 and shall be used to phase-in the rates and upper payment limits determined in accordance with the Phase Two methodology. The Phase One rates shall remain in effect for at least six months but for not more than 12 months from July 1, 2002.

Two rate listings are provided below. The first listing, titled "Phase One Rates," includes rates effective with service dates beginning July 1, 2002. The second listing includes rates determined in accordance with Phase Two. Both listings are preceded by a description of the cost center limitations and the case mix index used in setting those rates.

PHASE ONE RATES:

A. Cost Center Limitations: The state establishes the following cost center limitations which are based on limits in effect as of June 30, 2002 and are used in setting rates effective with service dates beginning July 1, 2002.

Cost Center	Limit Formula	Per Day Limit
Administration	\$15.78 x 1.02937	\$16.24
Property	\$12.32 x 1.02937	\$12.68
Room and Board	\$24.64 x 1.02937	\$25.36
Health Care (for CMI of 1.0)	\$67.15 x 1.02937	\$69.12

These amounts were determined according to the "Reimbursement Limitations" section set out in Part One of Section I.A. of this notice.

- **B.** Case Mix Index. These final rates are based upon each nursing facility's average CMI calculated with a cutoff date of May 1, 2002, using the July 1, 2001 Kansas Medicaid/Medikan CMI Table. In Section II.C below, each nursing facility's average CMI is listed beside its final per diem rate.
- C. Final Nursing Facility Per Diem Rates and CMI Effective with Service Dates Beginning July 1, 2002. The following rates have changed from those published in the Kansas Register on April 25, 2002 based on public comments received and directives found in House Substitute

for Senate Bill 363. In accordance with K.A.R. 30-10-18, the state will pay a nursing facility the lower of the per diem rate that the facility charges its private pay residents or the facility's final Medicaid per diem rate.

		Daily	Final
Facility Name	City	Rate	CMI
Abilene Nursing Center	Abilene	82.64	0.90
Alma Manor	Alma	109.24	0.83
Andover Health Care Center	Andover	96.15	1.18
Anthony Community Care Center	Anthony	101.74	0.85
Medicalodge East Healthcare Center	Arkaneae City	118.94	1.14
Medicalodge Post Acute & Rehab	Arkansas City	110.54	1.14
Center	Arkansas City	113.99	1.05
Arkansas City Presbyterian Manor	Arkansas City	111.13	1.30
Infinia at Arma	Arma	103.11	1.04
Ashland Health Center—LTCU	Ashland	99.98	0.84
Atchison Hospital SNF	Atchison	97.30	0.95
Medicalodge of Atchison	Atchison	102.92	1.20
Atchison Senior Village	Atchison	96.58 103.51	0.90 0.83
Dooley Center Attica Long Term Care	Atchison Attica	97.24	0.83
Atwood Good Samaritan Center	Atwood	98.49	0.86
Augusta Medical Complex	Augusta	76.74	0.86
Lake Point Nursing Center	Augusta	91.31	0.98
Baldwin Care Center	Baldwin City	95.05	0.94
Spring Valley Care Center	Baxter Springs	95.14	1.10
Quaker Hill Manor	Baxter Springs	79.18	0.92
Great Plains of Republic County, Inc.	Belleville	112.33	1.03
Belleville Health Care Center	Belleville	89.22	1.05
Great Plains of Mitchell County,	Believine	07.22	1.00
Inc.	Beloit	104.38	0.96
Hilltop Lodge Nursing Home	Beloit	87.30	0.92
Centers for LTC of Bonner			
Springs	Bonner Springs	98.70	1.03
Hill Top House	Bucklin	91.80	0.89
Buhler Sunshine Home, Inc. Life Care Center of Burlington	Buhler	106.11 95.80	0.97 0.99
Caney Nursing Center	Burlington Caney	69.52	0.89
Shiloh Manor of Canton, Inc.	Canton	96.92	1.03
Cedar Vale Nursing Center	Cedarvale	75.17	0.84
Eastridge Nursing Home	Centralia	97.41	1.00
Heritage Health Care Center	Chanute	82.06	1.29
Chanute Health Care Center	Chanute	93.15	1.12
Applewood Rehabilitation	Chanute	67.62	0.69 0.95
Chapman Valley Manor Cheney Golden Age Home Inc.	Chapman Cheney	86.79 95.55	1.03
Cherryvale Care Center	Cherryvale	101.16	1.03
Chetopa Manor	Chetopa	78.98	1.31
The Shepherd's Center	Cimarron	97.32	1.00
Medicalodge of Clay Center	Clay Center	100.37	0.99
Clay Center Presbyterian Manor	Clay Center	122.89	1.09
Clearwater Ret. Community, Inc.	Clearwater Clifton	105.54 69.84	0.95 0.91
Community Care Inc. Park Villa Nursing Home	Clyde	83.12	1.05
Coffeyville Regional Medical	Ciyac	00.12	1.00
Center	Coffeyville	155.62	1.51
Windsor Place	Coffeyville	96.03	1.10
Medicalodge East of Coffeyville	Coffeyville	99.45	1.19
Lantern Park Manor	Colby	91.72	1.14
Citizens Medical Center	Colby Coldwater	118.57 89.69	0.93 1.01
Pioneer Lodge Medicalodge of Columbus	Columbus	113.95	1.01
Colwich Health Center	Colwich	106.33	0.91
Mt. Joseph Senior Community,			
Inc.	Concordia	99.66	1.02
Sunset Nursing Center	Concordia	102.69	1.04
Spring View Manor	Conway Springs	83.13	0.95
Chase County Nursing Home	Cottonwood Falls	93.70	0.96
Council Grove Healthcare Center Hilltop Manor	Council Grove Cunningham	83.76 81.66	0.96 0.88
Westview Manor, Inc.	Derby	94.26	1.00
Grouse Valley Manor	Dexter	87.14	0.84
Lane County Hospital—LTCU	Dighton	106.27	0.79
Trinity Manor	Dodge City	106.44	0.96
Dodge City Good Samaritan	D 1 C:	100.12	0.07
Center Manor of the Plains	Dodge City	108.13	0.97
Manor of the Plains Medicalodge of Douglass	Dodge City Douglass	107.13 103.66	0.92 1.09
Downs Nursing Center	Douglass	87.08	1.09
Country Care Home	Easton	83.16	1.09
Parkway Care Home	Edwardsville	95.33	1.19
Edwardsville Convalescent Center	Edwardsville	108.19	1.26
Edwardsville Manor	Edwardsville	88.41	0.73
Lakepoint Nursing Center-El	El Donod -	02.07	0.05
Dorado	El Dorado	92.07	0.95

				O			
		Daily	Final			Daily	Final
Facility Name	City	Rate	CMI	Facility Name	City	Rate	CMI
Beverly Health & Rehab-El				Valley View Professional Care			
Dorado	El Dorado	86.06	1.02	Center	Junction City	85.22	1.10
Morton County Hospital	Elkhart	108.75	0.99	Junction City Good Samaritan	,		
Woodhaven Care Center	Ellinwood	87.78	1.15	Center	Junction City	99.21	1.12
Ellis Good Samaritan Center	Ellis	92.02	1.02	Medicalodge Post Acute Center	Kansas City	119.77	1.28
Good Samaritan Center-Villa	Ellsworth	113.34	1.06	Kansas City Presbyterian Manor	Kansas City	124.20 119.08	1.03 1.16
Grace Emporia Presbyterian Manor	Emporia	113.82	1.01	Medicalodge East of Kansas City Alzheimer's Center of Kansas City	Kansas City Kansas City	119.06	0.98
Holiday Resort	Emporia	91.44	1.11	The Manor of Kansas City	Kansas City Kansas City	98.04	1.13
Vintage Manor	Emporia	90.98	0.87	Infinia at Kensington	Kensington	90.39	0.82
Emporia Rehabilitation Center	Emporia	74.46	1.06	The Wheatlands	Kingman	89.64	0.91
Enterprise Estates Nursing Center,	•			Medicalodge of Kinsley	Kinsley	114.02	1.06
Inc.	Enterprise	81.48	0.97	Kiowa Hospital District Manor	Kiowa	98.18	0.85
Heritage Village-Eskridge	Eskridge	78.51	0.71	Rush Co. Memorial Hospital	La Crosse	93.42	0.91
Eudora Nursing Center	Eudora	88.86	0.89	Rush County Nursing Home	La Crosse	107.07	0.93
Medicalodge of Eureka Florence Health Care	Eureka Florence	111.67 71.85	1.20 0.79	High Plains Retirement Village	Lakin	121.23 92.46	1.24 1.13
Medicalodge of Ft. Scott	Fort Scott	114.25	1.24	Colonial Manor—Lansing Larned Healthcare Center	Lansing Larned	81.14	1.13
Fort Scott/Marmaton Valley	Fort Scott	80.48	1.37	St. Joseph Memorial Hospital	Larned	124.92	1.18
Fowler Nursing Home	Fowler	98.47	0.87	Colonial Manor-Lawrence	Lawrence	103.33	1.09
Frankfort Community Care				Lawrence Presbyterian Manor	Lawrence	131.68	1.14
Home, Inc.	Frankfort	93.31	0.91	Brandon Woods, Inc.	Lawrence	108.53	1.06
Beverly Health & Rehab-Fredonia	Fredonia	90.71	1.18	Pioneer Ridge Retirement			
Sunset Manor, Inc.	Frontenac	82.04	1.00	Community	Lawrence	139.08	1.29
Galena Nursing & Rehab Center	Galena	81.22	1.23	Leavenworth Co. Convalescent	T (1	02.00	1.00
Garden Valley Retirement Village	Garden City Garden City	106.36 107.50	1.14 1.19	Infirmary Medicalodge of Leavenworth	Leavenworth Leavenworth	83.99 113.03	1.06 1.24
Terrace Garden Care Center Meadowbrook Rehab Hosp.,	Garden City	107.50	1.19	Delmar Gardens of Lenexa	Lenexa	102.06	1.13
LTCU	Gardner	158.36	1.54	Lakeview Village	Lenexa	117.20	1.00
Medicalodge of Gardner	Gardner	105.39	0.93	Leonardville Nursing Home	Leonardville	76.88	1.01
Anderson County Hospital	Garnett	105.04	1.01	Golden Acres Nursing Home	Leoti	120.27	0.95
Golden Heights Living Center	Garnett	93.27	1.02	Liberal Good Samaritan Center	Liberal	101.52	1.00
The Heritage	Girard	79.54	1.08	Lincoln County Hospital LTCU	Lincoln	117.25	0.94
The Nicol Home, Inc.	Glasco	93.12	0.83	Mid-America Health Center of	T . 1	07.40	1.00
Medicalodge of Goddard	Goddard	117.92	1.24	Lincoln	Lincoln	87.49	1.08
Bethesda Home Sherman Co. Good Samaritan	Goessel	112.42	0.90	Bethany Home Association Linn Community Nursing Home	Lindsborg Linn	103.77 79.71	0.83 0.88
Center	Goodland	102.89	1.11	Sandstone Heights	Little River	95.72	0.92
Cherry Village Benevolence	Great Bend	90.89	1.02	Logan County Manor	Logan	81.72	0.88
Central Kansas Medical Center,				Louisburg Care Center	Louisburg	99.71	1.28
NF	Great Bend	124.92	1.18	Beverly Health & Rehab of Lucas	Lucas	90.02	1.11
Integrated Health Services of				Lyons Good Samaritan Center	Lyons	99.27	1.06
Great Bend	Great Bend	100.27	1.01	Madison Manor, Inc.	Madison	92.29	0.95
Halstead Health and Rehab	TT 1 . 1	104.00	1.00	Meadowlark Hills Retirement	3.6 1 11	100.60	1 11
Center Washington Cnty Hosp, Dist, #1/	Halstead	134.83	1.32	Community	Manhattan	128.63	1.11
Washington Cnty Hosp. Dist. #1/ Hanover	Hanover	82.14	0.93	St. Joseph Senior Community, Inc. Stoneybrook Retirement	Manhattan	100.44	1.06
Friendship Manor Rehab Ctr of	Tianover	02.14	0.73	Community	Manhattan	103.31	1.08
Haviland	Haviland	70.05	0.59	Jewell County Hospital	Mankato	106.39	0.95
Hays Medical Center	Hays	229.36	2.65	St. Luke Living Center	Marion	96.83	0.93
St. John's of Hays	Hays	97.06	0.91	Marion Manor	Marion	88.61	1.27
Hays Good Samaritan Center	Hays	102.36	1.09	Riverview Estates, Inc.	Marquette	83.65	0.90
Haysville Healthcare Center	Haysville	107.87	1.16	Community Memorial Healthcare,	3.6 (11	00.50	0.00
Lutheran Home, Inc. Schowalter Villa	Herington	84.26 119.80	0.92 0.97	Inc.	Marysville	90.53	0.88
Oak Ridge Acres	Hesston Hiawatha	72.23	0.94	Cambridge Place Infinia at McPherson	Marysville McPherson	93.72 104.48	1.05 1.34
Maple Heights of Hiawatha	Hiawatha	97.73	0.90	The Cedars, Inc.	McPherson	104.48	0.97
Highland Care Center	Highland	94.83	0.99	Lone Tree Compassionate Care	ivici ricisori	100.	0.57
Dawson Place, Inc.	Hill City	87.27	0.89	Corp.	Meade	105.76	0.90
Hillsboro Community Medical				Trinity Lutheran Manor	Merriam	119.45	1.23
Center	Hillsboro	100.98	0.91	Great Plains of Ottawa County,			
Parkside Homes, Inc.	Hillsboro	102.47	1.06	Inc.	Minneapolis	64.23	0.88
Hoisington Rehabilitation Center	Hoisington	80.70	0.94	Minneapolis Good Samaritan	M:	102.24	1.00
Jackson Co. Nursing Home, Inc. Holton Manor	Holton Holton	86.62 76.01	1.00 0.84	Center Minneola Nursing Home	Minneapolis Minneola	103.34 95.73	1.06 0.93
Tri County Manor Living Center,	Honon	70.01	0.04	Elk Manor Nursing Home	Moline	82.76	0.93
Inc.	Horton	75.82	1.03	Bethel Home, Inc.	Montezuma	105.04	0.91
Howard Twilight Manor	Howard	90.99	1.02	Moran Manor	Moran	81.11	1.10
Sheridan County Hospital	Hoxie	98.40	0.98	Memorial Home for the Aged	Moundridge	115.40	0.99
Pioneer Manor	Hugoton	110.67	0.91	Moundridge Manor, Inc.	Moundridge	82.51	0.76
Pinecrest Nursing Home	Humboldt	78.05	0.95	Mt. Hope Nursing Center	Mt. Hope	95.81	0.91
Golden Plains	Hutchinson	107.22	1.09	Villa Maria, Inc.	Mulvane	107.06	0.91
Hutchinson Good Samaritan	TT . 1 .	100 ==	0.00	Golden Keys Nursing Home	Neodesha	66.65	0.91
Center	Hutchinson	108.55	0.93	Beverly Health & Rehab of Neodesha	Neodesha	89.83	1.23
Oakwood Rehabilitation Center Wesley Towers	Hutchinson Hutchinson	80.14 121.86	1.07 1.00	Ness County Hospital Dist. #2	Ness City	102.91	0.85
Ray E. Dillon Living Center	Hutchinson Hutchinson	121.86	1.00	Bethel Care Centre	Newton	102.91	1.04
The Regal Estate of Glenwood	Independence	95.36	1.02	Friendly Acres, Inc.	Newton	119.34	1.05
Heatherwood Estates	Independence	79.44	1.03	Kansas Christian Home	Newton	114.02	0.88
Glenwood Estate	Independence	79.22	0.96	Newton Presbyterian Manor	Newton	127.64	1.10
Pleasant View Home	Inman	108.27	0.90	Andbe Home, Inc.	Norton	100.76	0.85
Windsor Place at Iola, LLC	Iola	96.76	1.09	Village Villa	Nortonville	86.06	1.24
Cheyenne Lodge, Inc.	Jamestown	74.86	1.08	Norwich Health Care Center	Norwich	87.34	0.82
Hodgeman Co. Health Center-	т.,	11407	0.00	Logan County Manor	Oakley Oberlin	72.90	1.00 0.96
LTCU Stanton County Hagnital LTCU	Jetmore	114.97	0.92	Decatur County Hospital	Opermi	88.67	
Stanton County Hospital- LTCU	Johnson	109.16	0.79				(continued)

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Eschile Name	C:1	Daily	Final	Parities Massa	C't	Daily	Final
Facility Name	City	Rate	CMI	Facility Name	City	Rate 95.99	CMI 0.91
Decatur Co. Good Samaritan Center	Oberlin	92.90	0.83	Leisure Homestead at St. John St. Mary's Manor	St. John St. Mary's	95.99 95.78	1.03
Villa St. Francis	Olathe	122.35	1.20	Prairie Mission Retirement Village	St. Paul	95.57	0.92
Centers for Long Term Care of Olathe	Olathe	105.55	1.00	Leisure Homestead at Stafford Sterling Presbyterian Manor	Stafford Sterling	76.56 98.37	0.88 0.96
Royal Terrace Nrsg. & Rehab.				Solomon Valley Manor	Stockton	96.95	0.96
Center Olathe Good Samaritan Center	Olathe Olathe	106.63 122.32	1.18 1.07	Hamilton Co. Hospital-LTCU Tonganoxie Nursing Center	Syracuse Tonganoxie	107.70 102.68	0.86 1.11
Johnson County Nursing Center	Olathe	123.55	1.01	Topeka Healthcare Center	Topeka	101.75	1.25
Aberdeen Village, Inc. Golden Acres	Olathe Onaga	120.26 85.12	1.00 1.01	Brewster Place Topeka Presbyterian Manor Inc.	Topeka Topeka	125.94 127.32	1.26 1.25
Peterson Nursing Home	Osage City	79.90	1.00	Eventide Convalescent Center,	Торека	127.32	1.23
Osage Nursing & Rehabilitation Center	Osage City	88.98	1.01	Inc.	Topeka	88.85	0.84
Life Care Center of Osawatomie	Osawatomie	116.39	1.35	IHS of Highland Park McCrite Plaza Health Center	Topeka Topeka	105.23 111.29	0.92 1.10
Parkview Care Center	Osborne	94.96	0.94	Rolling Hills Health Center	Topeka	106.85	1.31
Hickory Pointe Care & Rehab Ctr. Infinia at Oswego	Oskaloosa Oswego	97.51 92.11	1.09 1.01	Manorcare Health Services of Topeka	Topeka	112.65	1.17
Village Manor	Ottawa	92.97	1.17	United Methodist Home	Topeka	110.58	0.85
Brookside Manor Garden Terrace at Overland Park	Overbrook Overland Park	100.57 110.51	1.04 0.99	Woodland Health Center	Topeka	82.79	0.85
Specialty Hospital of Overland	Overland I ark	110.51	0.55	Westwood Manor IHS of Brighton Place	Topeka Topeka	97.05 72.93	1.12 0.62
Park	Overland Park	137.63	1.27	Countryside Health Center	Topeka	76.83	0.63
Manorcare Hlth Services of Overland Park	Overland Park	124.42	1.13	Southgate Village Life Care Center	Topeka	81.89	1.13
Villa Saint Joseph	Overland Park	123.83	1.09	Indian Trails Manor	Topeka	66.91	0.62
Delmar Gardens of Overland Park Overland Park Manor	Overland Park Overland Park	112.75 124.96	1.38 1.12	Infinia at Central Topeka	Topeka	90.73	1.29
Indian Creek Nursing Center	Overland Park	114.56	1.35	Brighton Place North Aldersgate Village	Topeka Topeka	63.58 133.49	0.62 1.15
Village Shalom, Inc.	Overland Park	144.84	1.31 0.96	Plaza West Care Center, Inc.	Topeka	124.58	1.29
Riverview Manor, Inc. Medicalodge of Paola	Oxford Paola	90.10 84.68	0.96	Lexington Park Nursing and Post	T1	120.02	1.27
North Point Skilled Nursing				Acute Greeley County Hospital, LTCU	Topeka Tribune	139.82 111.16	1.37 0.97
Center Elmhaven East	Paola Parsons	107.34 71.52	1.00 1.10	Western Prairie Care Home	Ulysses	118.77	0.95
Elmhaven West	Parsons	76.66	0.97	Valley Health Care Center	Valley Falls Victoria	80.32 86.56	0.66 0.95
Parsons Presbyterian Manor	Parsons	110.05	1.10	St. John's Rest Home of Victoria Trego Co. Lemke Memorial LTCU	WaKeeney	113.12	0.93
Parsons Good Samaritan Center Peabody Community Living	Parsons	96.40	1.14	The Lutheran Home—WaKeeney	WaKeeney	80.22	0.92
Center	Peabody	104.53	1.00	Heritage Village-Wakefield Valley Vista Good Samaritan	Wakefield	82.99	1.33
Westview Manor of Peabody Phillips County Hospital LTCU	Peabody Phillipsburg	67.74 113.64	0.63 0.98	Center	Wamego	100.83	0.96
Phillips County Retirement Center	Phillipsburg	80.00	0.90	The Centennial Homestead, Inc.	Washington	69.06	0.89
Medicalodge South of Pittsburg	Pittsburg	109.31	1.07	Colonial Manor—Wathena Coffey County Hospital	Wathena Waverly	89.34 116.25	1.19 0.91
Medicalodge North of Pittsburg Mt. Carmel Medical Center	Pittsburg Pittsburg	101.66 186.62	1.00 2.06	Beverly Health & Rehab-	· · · · · · · · · · · · · · · · · · ·		
Beverly Rehabilitation Center	Pittsburg	93.19	1.25	Wellington Cedar View Good Samaritan	Wellington	89.29	0.91
Rooks County Home Pratt Regional Medical Center	Plainville Pratt	97.65 105.59	0.88 0.97	Center	Wellington	102.27	0.93
Friendship Manor of Pratt	Pratt	88.61	1.16	Wellsville Manor	Wellsville	101.12	0.97
Prescott Country View Nursing Center	Prescott	72.84	0.88	Westy Community Care Home Wheat State Manor	Westmoreland Whitewater	87.12 106.52	0.92 0.90
Prairie Sunset Manor	Pretty Prairie	90.81	0.94	Wichita Healthcare & Rehab	William	100.02	
Protection Valley Manor	Protection	77.05	0.84	Center	Wichita Wichita	115.05	0.99
Gove County Medical Center Grisell Memorial Hosp. Dist. #1-	Quinter	106.66	0.94	Medicalodge of Wichita Meridian Nursing & Rehab Center	Wichita	136.49 99.11	1.20 1.09
LTCU	Ransom	114.60	0.98	Catholic Care Center Inc.	Wichita	107.53	1.09
Richmond Care Center Lakepoint Nursing Ctr-Rose Hill	Richmond Rose Hill	87.66 98.17	0.91 1.02	Kansas Masonic Home Homestead Health Center, Inc.	Wichita Wichita	122.18 107.48	1.15 1.02
Rossville Valley Manor	Rossville	112.35	1.00	Horizon Specialty Hospital	Wichita	114.33	1.06
Wheatland Nursing & Rehab	Duncall	02.50	1 15	Infinia at Wichita	Wichita	116.83	0.98
Center Gatewood Care Center	Russell Russell	92.58 69.51	1.15 0.66	Wichita Presbyterian Manor Sandpiper Bay Health &	Wichita	125.79	1.33
Sabetha Nursing Center	Sabetha	88.57	1.12	Retirement Ctr.	Wichita	97.74	1.06
Apostolic Christian Home Smokey Hill Rehabilitation Center	Sabetha Salina	84.71 96.83	0.99 1.00	Manorcare Health Services of Wichita	Wichita	100.53	1.03
Kenwood View Nursing Center	Salina	89.81	0.91	IHS of Wichita	Wichita	123.97	1.17
Windsor Estates Center for LTC of Salina	Salina Salina	100.12	1.06	Lakewood Heights Nursing	TAT: 1 · .	06.22	1.00
Salina Presbyterian Manor	Salina	94.01 111.51	1.12 1.02	Center Lincoln East Nursing Home	Wichita Wichita	96.23 98.39	1.33 1.00
Shalimar Health Center	Salina	70.12	1.03	Cameo Care Center	Wichita	98.47	0.75
Holiday Resort of Salina Satanta Dist. Hosp. LTCU	Salina Satanta	96.02 123.04	0.99 0.99	The Health Care	TATi alaita	110 22	0.02
Park Lane Nursing Home	Scott City	100.30	0.84	Center@Larksfield Place Life Care Center of Wichita	Wichita Wichita	118.22 112.90	0.92 1.36
Pleasant Valley Manor	Sedan	77.16	1.13	Wilson Nursing Home	Wilson	90.24	1.26
Sedgwick Healthcare Center Crestview Manor	Sedgwick Seneca	101.28 59.92	1.20 1.03	Jefferson Co. Memorial Hospital- LTCU	Winchester	95.75	0.82
Country View Estates Care Home	Seneca	76.81	0.95	Good Samaritan Village-Winfield	Winfield	113.35	1.11
Prairie Manor Good Samaritan Center	Sharon Springs	91.31	0.86	Cumbernauld Village, Inc.	Winfield	113.15	0.98
Shawnee Gardens Nursing Center	Shawnee	117.64	1.10	Winfield Rest Haven, Inc. Twin Oaks Health Care	Winfield Yates Center	88.06 86.51	0.86 1.23
Sharonlane Nursing Home	Shawnee	107.66	1.09				1.23
Great Plains of Smith County, Inc. Infinia at Smith Center	Smith Center Smith Center	96.59 87.39	0.93 0.96	PHASE '	TWO RATES	:	
Mennonite Friendship Manor, Inc.	South Hutchinson	115.16	1.05	A. Cost Center Limitat	ions: The stat	te establic	hes the
Beverly Hlth & Rehab-Spring Hill St. Francis Good Samaritan Ctr.	Spring Hill St. Francis	103.73 100.77	1.36 1.01	following cost center limit			
5. Trancis Good Samaritan Cir.	J. TIGING	100.77	1.01	15110 William Cook Cellici IIIIII	WEIGHT WHITEH	are abea ii	Security

Notice

rates effective not sooner than six months but no later than 12 months from July 1, 2002.

Cost Center	Limit Formula	Per Day Limit
Operating	110% of the Median Cost	\$20.32
Indirect Health Care	115% of the Median Cost	\$33.35
Direct Health Care	120% of the Median Cost	\$61.78
Real and Personal		
Property Fee	105% of the Median Fee	\$6.11

These amounts were determined according to the "Reimbursement Limitations" section set out above in Part One, Phase Two of Section I.A. of this notice. The Direct Healthcare Limit is calculated based on a CMI of 0.9187, which is the statewide average.

- **B.** Case Mix Index. These final rates are based upon each nursing facility's Medicaid average CMI calculated with a cutoff date of April 1, 2002, using the July 1, 2002 Kansas Medicaid/Medikan CMI Table. In Section II.C below, each nursing facility's Medicaid average CMI is listed beside its final per diem rate.
- C. Final Nursing Facility Per Diem Rates and Medicaid CMI to be Effective Not Sooner Than Six Months But No Later Than 12 Months from July 1, 2002. The final rates listed below differ from the proposed rates published in the April 25, 2002 Kansas Register because of several factors, including, but not limited to: adjustments due to completion of all the desk reviews of all the nursing facility cost reports, including those cost reports submitted after the February 28, 2002 deadline; consideration of amended nursing facility cost reports; and/or rebasing of property fees. All of these factors impact cost center upper payment limits and individual nursing facility rates. These rates may be revised again based on the implementation date and revised CMI information. In accordance with K.A.R. 30-10-18, the state will pay a nursing facility the lower of the per diem rate that the facility charges its private pay residents or the facility's final Medicaid per diem rate.

Facility Name	City	Daily Rate	Medicaid CMI
Abilene Nursing Center	Abilene	95.86	0.9383
Alma Manor	Alma	114.42	0.8354
Andover Health Care Center	Andover	94.85	0.9438
Anthony Community Care Center	Anthony	101.02	0.8665
Medicalodge East Healthcare	•		
Center	Arkansas City	115.74	0.9652
Medicalodge Post Acute & Rehab	•		
Center	Arkansas City	116.77	0.9568
Arkansas City Presbyterian Manor	Arkansas City	111.88	1.0247
Infinia at Arma	Arma	107.19	0.9200
Ashland Health Center—LTCU	Ashland	117.10	0.9676
Atchison Hospital SNF	Atchison	110.51	0.9944
Medicalodge of Atchison	Atchison	108.40	0.9130
Atchison Senior Village	Atchison	95.73	0.8529
Dooley Center	Atchison	110.46	0.7976
Attica Long Term Care	Attica	101.52	0.9517
Atwood Good Samaritan Center	Atwood	108.37	0.9985
Augusta Medical Complex	Augusta	96.78	0.8955
Lake Point Nursing Center	Augusta	97.41	0.9662
Baldwin Care Center	Baldwin City	97.49	0.8853
Spring Valley Care Center	Baxter Springs	105.95	0.8158
Quaker Hill Manor	Baxter Springs	76.92	0.8725
Great Plains of Republic County,			
Inc.	Belleville	120.95	0.9950
Belleville Health Care Center	Belleville	91.58	0.9358
Great Plains of Mitchell County,			
Inc.	Beloit	118.35	0.9582
Hilltop Lodge Nursing Home	Beloit	100.34	0.8729
Centers for LTC of Bonner			
Springs	Bonner Springs	107.62	0.9217

Facility Name	City	Daily Rate	Medicaid CMI
Hill Top House	Bucklin	103.42	0.9463
Buhler Sunshine Home, Inc.	Buhler	105.82	0.9091
Life Care Center of Burlington	Burlington	103.71	0.8364
Caney Nursing Center	Caney	80.37	0.8296
Shiloh Manor of Canton, Inc.	Canton	107.56	1.0310
Cedar Vale Nursing Center Eastridge Nursing Home	Cedarvale Centralia	73.14 95.88	0.7872 0.7908
Heritage Health Care Center	Chanute	85.39	0.7308
Chanute Health Care Center	Chanute	96.73	0.9545
Applewood Rehabilitation	Chanute	65.34	0.7184
Chapman Valley Manor	Chapman	87.76	0.9189
Cheney Golden Age Home Inc.	Cheney	97.02	0.9066
Cherryvale Care Center	Cherryvale	94.60	0.8750
Chetopa Manor The Shaphard's Contor	Chetopa Cimarron	78.77 93.60	1.0015 1.0893
The Shepherd's Center Medicalodge of Clay Center	Clay Center	101.51	0.8260
Clay Center Presbyterian Manor	Clay Center	129.87	1.1200
Clearwater Ret. Community, Inc.	Clearwater	103.91	0.9277
Community Care Inc.	Clifton	72.93	1.0357
Park Villa Nursing Home	Clyde	87.01	0.9445
Coffeyville Regional Medical	C - ((:11 -	150 (2	1 4700
Center Windsor Place	Coffeyville	158.62 98.62	1.4700 0.9755
Medicalodge East of Coffeyville	Coffeyville Coffeyville	98.97	0.9733
Lantern Park Manor	Colby	89.61	0.9214
Citizens Medical Center	Colby	116.89	0.9953
Pioneer Lodge	Coldwater	96.83	0.9936
Medicalodge of Columbus	Columbus	110.23	1.0103
Colwich Health Center	Colwich	98.81	0.8954
Mt. Joseph Senior Community,	Compoudio	105.22	1 0222
Inc. Sunset Nursing Center	Concordia Concordia	105.32 106.92	1.0232 1.0611
Spring View Manor	Conway Springs	84.90	0.9100
Chase County Nursing Home	Cottonwood Falls	92.54	0.9705
Council Grove Healthcare Center	Council Grove	86.94	0.9191
Hilltop Manor	Cunningham	83.19	0.8948
Westview Manor, Inc.	Derby	94.35	0.8905
Grouse Valley Manor	Dexter	89.14	0.8628
Lane County Hospital—LTCU Trinity Manor	Dighton Dodge City	119.06 108.56	0.9450 0.9384
Dodge City Good Samaritan	Douge City	100.50	0.7504
Center	Dodge City	107.97	0.9691
Manor of the Plains	Dodge City	115.02	0.9850
Medicalodge of Douglass	Douglass	123.76	0.9674
Downs Nursing Center	Downs	82.60	0.8496
Country Care Home	Easton Edwardsville	92.69 97.46	0.9167
Parkway Care Home Edwardsville Convalescent Center	Edwardsville	114.47	0.9763 0.9110
Edwardsville Manor	Edwardsville	78.94	0.7498
Lakepoint Nursing Center-El			
Dorado	El Dorado	93.06	0.9274
Beverly Health & Rehab-El	F1 F 1		0.004.0
Dorado	El Dorado	87.97	0.9010
Morton County Hospital Woodhaven Care Center	Elkhart Ellinwood	103.86 96.85	1.0058 0.9715
Ellis Good Samaritan Center	Ellis	103.96	0.9353
Good Samaritan Center-Villa	21110	100.70	0.5000
Grace	Ellsworth	112.37	1.0191
Emporia Presbyterian Manor	Emporia	117.44	0.9338
Holiday Resort	Emporia	100.12	0.8682
Vintage Manor	Emporia	91.55	0.7763
Emporia Rehabilitation Center Enterprise Estates Nursing Center,	Emporia	83.78	0.9933
Inc.	Enterprise	82.93	0.9889
Heritage Village-Eskridge	Eskridge	76.94	0.7076
Eudora Nursing Center	Eudora	90.86	0.8731
Medicalodge of Eureka	Eureka	114.40	0.8982
Florence Health Care	Florence	72.42	0.7817
Medicalodge of Ft. Scott	Fort Scott	123.11	0.9874
Fort Scott/Marmaton Valley	Fort Scott Fowler	102.65 98.12	1.1700 0.8165
Fowler Nursing Home Frankfort Community Care	rowiei	90.12	0.0103
Home, Inc.	Frankfort	92.48	0.9213
Beverly Health & Rehab-Fredonia	Fredonia	81.79	0.8686
Sunset Manor, Inc.	Frontenac	87.32	0.9380
Galena Nursing & Rehab Center	Galena	84.23	0.8741
Garden Valley Retirement Village	Garden City	113.45	0.9402
Terrace Garden Care Center	Garden City	114.52	0.8815
Meadowbrook Rehab Hosp., LTCU	Gardner	131.59	1.0679
Medicalodge of Gardner	Gardner	108.09	0.7412
0			(continued

		Daily	Medicaid			Daily	Medicaid
Facility Name	City	Rate	CMI	Facility Name	City	Rate	CMI
Anderson County Hospital	Garnett	114.48	0.8547	Medicalodge of Leavenworth	Leavenworth	118.10	0.9620
Golden Heights Living Center	Garnett	97.68	0.9189	Delmar Gardens of Lenexa	Lenexa	105.66	0.9620
The Heritage	Girard	79.88	1.0087	Lakeview Village	Lenexa	115.67	0.9187
The Nicol Home, Inc.	Glasco	85.32	0.6900	Leonardville Nursing Home	Leonardville	81.46	1.0304
Medicalodge of Goddard	Goddard	94.22	0.9883	Golden Acres Nursing Home	Leoti	129.03	1.0911
Bethesda Home	Goessel	117.87	0.8838	Liberal Good Samaritan Center	Liberal Lincoln	106.60	0.9482 1.0933
Sherman Co. Good Samaritan Center	Goodland	105.70	0.9781	Lincoln County Hospital LTCU Mid-America Health Center of	LIICOIII	127.41	1.0933
Cherry Village Benevolence	Great Bend	93.52	0.8706	Lincoln	Lincoln	94.30	0.9994
Central Kansas Medical Center,	Great Bena	JOI.02	0.07.00	Bethany Home Association	Lindsborg	121.38	1.0394
NF	Great Bend	114.38	1.0170	Linn Community Nursing Home	Linn	79.24	0.8839
Integrated Health Services of				Sandstone Heights	Little River	102.67	0.8895
Great Bend	Great Bend	108.94	0.8889	Logan County Manor	Logan	90.73	0.9677
Halstead Health and Rehab	TT 1 . 1	105.00	0.0000	Louisburg Care Center	Louisburg	105.54	0.9732
Center Washington Cnty, Hosp, Dist, #1/	Halstead	125.89	0.9800	Beverly Health & Rehab of Lucas Lyons Good Samaritan Center	Lucas Lyons	85.09 101.46	0.8995 0.9190
Washington Cnty. Hosp. Dist. #1/ Hanover	Hanover	82.86	0.9200	Madison Manor, Inc.	Madison	100.99	0.9658
Friendship Manor Rehab Ctr. of	Tiunovei	02.00	0.5200	Meadowlark Hills Retirement	Madison	100.55	0.7000
Haviland	Haviland	66.99	0.6803	Community	Manhattan	118.83	0.9721
Hays Medical Center	Hays	155.53	1.4546	St. Joseph Senior Community, Inc.	Manhattan	99.16	0.9648
St. John's of Hays	Hays	94.01	0.9200	Stoneybrook Retirement			
Hays Good Samaritan Center	Hays	109.55	0.9428	Community	Manhattan	111.60	0.9875
Haysville Healthcare Center	Haysville	114.82	0.9634	Jewell County Hospital	Mankato	99.71	0.6942
Lutheran Home, Inc. Schowalter Villa	Herington Hesston	84.97 124.32	0.8950 0.9598	St. Luke Living Center Marion Manor	Marion Marion	95.27 88.08	0.8779 0.9313
Oak Ridge Acres	Hiawatha	75.80	0.8331	Riverview Estates, Inc.	Marquette	87.26	0.9313
Maple Heights of Hiawatha	Hiawatha	100.31	0.8786	Community Memorial Healthcare,	Marquette	07.20	0.07 70
Highland Care Center	Highland	96.41	0.8782	Inc.	Marysville	94.86	0.9106
Dawson Place, Inc.	Hill City	85.25	0.9129	Cambridge Place	Marysville	97.82	0.9646
Hillsboro Community Medical	,			Infinia at McPherson	McPherson	112.34	1.0767
Center	Hillsboro	111.35	0.9048	The Cedars, Inc.	McPherson	109.82	0.9021
Parkside Homes, Inc.	Hillsboro	111.47	0.9831	Lone Tree Compassionate Care	3.6	404 =0	0.044=
Hoisington Rehabilitation Center	Hoisington	88.89	0.8929	Corporation	Meade	101.59	0.8125
Jackson Co. Nursing Home, Inc. Holton Manor	Holton Holton	90.08 93.11	0.9965 0.8467	Trinity Lutheran Manor	Merriam	116.03	0.9187
Tri County Manor Living Center,	Hotton	95.11	0.0407	Great Plains of Ottawa County, Inc.	Minneapolis	88.24	1.2300
Inc.	Horton	92.78	0.9386	Minneapolis Good Samaritan	winincapons	00.24	1.2500
Howard Twilight Manor	Howard	97.06	0.9375	Center	Minneapolis	102.52	0.9426
Sheridan County Hospital	Hoxie	109.54	0.9957	Minneola Nursing Home	Minneola	108.36	0.8620
Pioneer Manor	Hugoton	123.24	0.9845	Elk Manor Nursing Home	Moline	98.56	0.9032
Pinecrest Nursing Home	Humboldt	92.85	0.9352	Bethel Home, Inc.	Montezuma	100.30	0.9385
Golden Plains	Hutchinson	115.32	0.9958	Moran Manor	Moran	84.23	0.9613
Hutchinson Good Samaritan	I I t . l. i	107.25	0.0007	Memorial Home for the Aged	Moundridge	115.35	0.8982
Center	Hutchinson Hutchinson	107.25	0.9087	Moundridge Manor, Inc.	Moundridge	81.74	0.7971 0.8352
Oakwood Rehabilitation Center Wesley Towers	Hutchinson	103.95 125.13	0.9621 0.9719	Mt. Hope Nursing Center Villa Maria, Inc.	Mt. Hope Mulvane	100.08 105.07	0.8352
Ray E. Dillon Living Center	Hutchinson	118.03	0.9757	Golden Keys Nursing Home	Neodesha	71.08	0.9111
The Regal Estate of Glenwood	Independence	96.15	0.9073	Beverly Health & Rehab of			
Heatherwood Estates	Independence	77.32	0.9330	Neodesha	Neodesha	90.92	0.8945
Glenwood Estate	Independence	81.90	1.0023	Ness County Hospital Dist. #2	Ness City	99.08	0.7875
Pleasant View Home	Inman	109.65	0.8785	Bethel Care Centre	Newton	115.53	1.1091
Windsor Place at Iola, LLC	Iola	98.77	0.9341	Friendly Acres, Inc.	Newton	122.24	0.9308
Cheyenne Lodge, Inc.	Jamestown	80.01	0.9400	Kansas Christian Home	Newton	116.54	0.8788
Hodgeman Co. Health Center- LTCU	Jetmore	121.58	0.9707	Newton Presbyterian Manor Andbe Home, Inc.	Newton Norton	117.27 101.04	0.8756 0.8294
Stanton County Hospital- LTCU	Johnson	116.45	0.8777	Village Villa	Nortonville	104.49	0.8888
Valley View Professional Care	,			Norwich Health Care Center	Norwich	83.72	0.8138
Center	Junction City	81.09	0.7933	Logan County Manor	Oakley	91.15	0.9187
Junction City Good Samaritan				Decatur County Hospital	Oberlin	100.60	0.8718
Center	Junction City	102.02	0.9748	Decatur Co. Good Samaritan			
Medicalodge Post Acute Center	Kansas City	114.61	0.9837	Center	Oberlin	97.35	0.8243
Kansas City Presbyterian Manor	Kansas City	125.31	0.9752	Villa St. Francis	Olathe	119.92	0.9551
Medicalodge East of Kansas City Alzheimer's Center of Kansas City	Kansas City Kansas City	126.77 107.82	0.9941 0.9328	Centers for Long Term Care of Olathe	Olatha	110.02	0.9617
The Manor of Kansas City	Kansas City	98.00	0.9328	Royal Terrace Nrsg. & Rehab.	Olathe	110.03	0.9617
Infinia at Kensington	Kensington	88.60	0.7678	Center	Olathe	106.60	0.9557
The Wheatlands	Kingman	95.34	0.9027	Olathe Good Samaritan Center	Olathe	121.70	0.9459
Medicalodge of Kinsley	Kinsley	110.83	0.8303	Johnson County Nursing Center	Olathe	122.74	0.9363
Kiowa Hospital District Manor	Kiowa	97.29	0.8482	Aberdeen Village, Inc.	Olathe	122.69	0.9600
Rush Co. Memorial Hospital	La Crosse	97.14	0.9125	Golden Acres	Onaga	81.77	0.9669
Rush County Nursing Home	La Crosse	104.02	0.9256	Peterson Nursing Home	Osage City	80.99	0.8446
High Plains Retirement Village	Lakin	128.37	1.0257	Osage Nursing & Rehabilitation	O C''	100.07	0.0775
Colonial Manor—Lansing	Lansing	100.38	0.9133	Center Life Care Center of Osawatemia	Osage City	100.96	0.9765
Larned Healthcare Center St. Joseph Memorial Hospital	Larned Larned	92.76 114.38	0.8522 1.0170	Life Care Center of Osawatomie Parkview Care Center	Osawatomie Osborne	124.67 103.66	0.9735 0.9472
Colonial Manor-Lawrence	Lawrence	115.49	0.9058	Hickory Pointe Care & Rehab Ctr.	Oskaloosa	103.66	0.9472
Lawrence Presbyterian Manor	Lawrence	120.88	0.9550	Infinia at Oswego	Oswego	104.29	0.8233
Brandon Woods, Inc.	Lawrence	112.07	0.9022	Village Manor	Ottawa	104.35	0.9961
Pioneer Ridge Retirement		-	-	Brookside Manor	Overbrook	105.20	0.9119
Community	Lawrence	113.80	0.8900	Garden Terrace at Overland Park	Overland Park	107.83	0.8608
Leavenworth Co. Convalescent		454	0.000=	Specialty Hospital of Overland	0 1 1= :	400	0.0=:-
Infirmary	Leavenworth	121.75	0.9995	Park	Overland Park	123.78	0.9518

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Facility Name	City	Daily Rate	Medicaid CMI	Facility Name	City
Manorcare Hlth Services of				United Methodist Home	Topeka
Overland Park	Overland Park	113.23	0.8687	Woodland Health Center	Topeka
Villa Saint Joseph	Overland Park	116.46	0.9179	Westwood Manor	Topeka
Delmar Gardens of Overland Park	Overland Park	117.82	0.9088	IHS of Brighton Place	Topeka
Overland Park Manor	Overland Park	120.34	0.9810	Countryside Health Center	Topeka
Indian Creek Nursing Center	Overland Park	117.61	1.0104	Southgate Village Life Care	-
Village Shalom, Inc.	Overland Park	127.70	1.0100	Center	Topeka
Riverview Manor, Inc.	Oxford	90.37	0.9741	Indian Trails Manor	Topeka
Medicalodge of Paola	Paola	86.35	0.6489	Infinia at Central Topeka	Topeka
North Point Skilled Nursing				Brighton Place North	Topeka
Center	Paola	113.14	0.9635	Aldersgate Village	Topeka
Elmhaven East	Parsons	75.15	0.9081	Plaza West Care Center, Inc.	Topeka
Elmhaven West	Parsons	81.45	0.8338	Lexington Park Nursing and Post	Tr. 1
Parsons Presbyterian Manor	Parsons	110.11	0.8887	Acute	Topeka Tribune
Parsons Good Samaritan Center	Parsons	99.00	0.9259	Greeley County Hospital, LTCU Western Prairie Care Home	Ulysses
Peabody Community Living	D 1 1	104 71	0.0000	Valley Health Care Center	Valley Falls
Center	Peabody	104.71	0.9888	St. John's Rest Home of Victoria	Victoria
Westview Manor of Peabody	Peabody	73.46	0.6349	Trego Co. Lemke Memorial LTCU	WaKeeney
Phillips County Potitionary Contar	Phillipsburg Phillipsburg	126.37 86.21	1.0829 0.9062	The Lutheran Home—WaKeeney	WaKeeney
Phillips County Retirement Center Medicalodge South of Pittsburg	Pittsburg	113.42	1.0034	Heritage Village-Wakefield	Wakefield
Medicalodge North of Pittsburg	Pittsburg	100.98	0.9119	Valley Vista Good Samaritan	
Mt. Carmel Medical Center	Pittsburg	166.57	1.6200	Center	Wamego
Beverly Rehabilitation Center	Pittsburg	88.40	0.9426	The Centennial Homestead, Inc.	Washington
Rooks County Home	Plainville	94.69	0.8820	Colonial Manor—Wathena	Wathena
Pratt Regional Medical Center	Pratt	106.14	0.8935	Coffey County Hospital	Waverly
Friendship Manor of Pratt	Pratt	96.31	0.9712	Beverly Health & Rehab-	
Prescott Country View Nursing	11444	70.01	0.77.12	Wellington	Wellington
Center	Prescott	78.09	0.8946	Cedar View Good Samaritan	* · · · · · · · · · · · · · · · · · · ·
Prairie Sunset Manor	Pretty Prairie	93.99	1.0167	Center	Wellington
Protection Valley Manor	Protection	85.81	0.7853	Wellsville Manor	Wellsville
Gove County Medical Center	Quinter	102.64	0.9286	Westy Community Care Home Wheat State Manor	Westmoreland
Grisell Memorial Hosp. Dist. #1-				Wichita Healthcare & Rehab	Whitewater
LTCU	Ransom	119.74	0.9931	Center	Wichita
Richmond Care Center	Richmond	88.74	0.8439	Medicalodge of Wichita	Wichita
Lakepoint Nursing Ctr-Rose Hill	Rose Hill	101.59	0.9403	Meridian Nursing & Rehab Center	Wichita
Rossville Valley Manor	Rossville	114.39	0.9889	Catholic Care Center Inc.	Wichita
Wheatland Nursing & Rehab				Kansas Masonic Home	Wichita
Center	Russell	94.29	0.9400	Homestead Health Center, Inc.	Wichita
Gatewood Care Center	Russell	70.05	0.7195	Horizon Specialty Hospital	Wichita
Sabetha Nursing Center	Sabetha	92.89	0.9395	Infinia at Wichita	Wichita
Apostolic Christian Home	Sabetha	88.72	0.9212	Wichita Presbyterian Manor	Wichita
Smokey Hill Rehabilitation Center	Salina	92.84	0.8594	Sandpiper Bay Health &	
Kenwood View Nursing Center	Salina Salina	87.01	0.8349	Retirement Ctr.	Wichita
Windsor Estates		100.48	0.8766	Manorcare Health Services of	TAT: 1 :.
Center for LTC of Salina Salina Presbyterian Manor	Salina Salina	107.42 109.20	0.9836 0.8025	Wichita	Wichita
Shalimar Health Center	Salina	73.08	0.9761	IHS of Wichita Lakewood Heights Nursing	Wichita
Holiday Resort of Salina	Salina	91.95	0.8124	Center	Wichita
Satanta Dist. Hosp. LTCU	Satanta	125.03	1.0186	Lincoln East Nursing Home	Wichita
Park Lane Nursing Home	Scott City	109.17	0.8608	Cameo Care Center	Wichita
Pleasant Valley Manor	Sedan	81.08	1.0245	The Health Care	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
Sedgwick Healthcare Center	Sedgwick	106.09	1.0627	Center@Larksfield Place	Wichita
Crestview Manor	Seneca	77.07	0.9960	Life Care Center of Wichita	Wichita
Country View Estates Care Home	Seneca	78.37	0.9187	Wilson Nursing Home	Wilson
Prairie Manor Good Samaritan				Jefferson Co. Memorial Hospital-	
Center	Sharon Springs	86.59	0.8744	LTCU	Winchester
Shawnee Gardens Nursing Center	Shawnee	111.46	0.8135	Good Samaritan Village-Winfield	Winfield
Sharonlane Nursing Home	Shawnee	109.30	0.9337	Cumbernauld Village, Inc.	Winfield
Great Plains of Smith County, Inc.	Smith Center	102.76	0.9743	Winfield Rest Haven, Inc.	Winfield
Infinia at Smith Center	Smith Center	100.04	0.9627	Twin Oaks Health Care	Yates Center
Mennonite Friendship Manor, Inc.	South Hutchinson	122.26	0.9846	III. Justifications for th	e Final Rates
Beverly Hlth & Rehab-Spring Hill	Spring Hill	101.12	0.8296	_	
St. Francis Good Samaritan Ctr.	St. Francis	103.62	0.8967	Two sets of justification	ıs are present
Leisure Homestead at St. John	St. John	93.75	0.7691	set of justifications is for the	he rates listed
St. Mary's Manor	St. Mary's	107.67	0.9718	One. The second set of ju	
Prairie Mission Retirement Village	St. Paul	99.64	0.9129		Simications 15
Leisure Homestead at Stafford	Stafford	78.97	0.9000	in Part One, Phase Two.	
Sterling Presbyterian Manor	Sterling	106.11	0.8307	Part One: Phase One Rat	toc
Solomon Valley Manor	Stockton	108.71	0.8763		
Hamilton Co. Hospital-LTCU	Syracuse	117.61	0.9400	 The final rates are calc 	ulated accord
Tonganoxie Nursing Center	Tonganoxie	98.39	0.9202	ting methodology in t	
Topeka Healthcare Center	Topeka	97.30	1.0189		
Brewster Place	Topeka	122.94	0.9400	and pending amendm	
Topeka Presbyterian Manor Inc.	Topeka	124.31	0.9552	2. The final rates are cal-	culated accor
Eventide Convalescent Center,	Topoka	QE 12	0.8330	ology which satisfies	
Inc. IHS of Highland Park	Topeka Topeka	85.12 109.68	0.8230		
IHS of Highland Park McCrite Plaza Health Center	Topeka Topeka	109.68	0.8886 0.8645	708c(x) and the Depar	
McCrite Plaza Health Center	Topeka	100.91	0.8645	tion Services regulat	tions in K.A
Rolling Hills Health Center	Topeka	110.19	0.9541	1	

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Manorcare Health Services of

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ld ld Center ıl Rates.

presented below. The first s listed in Part One, Phase tions is for the rates listed

- according to the rate-setnsas Medicaid State Plan ereto.
- d according to a methodquirements of K.S.A. 39-708c(x) and the Department of Social and Rehabilitation Services regulations in K.A.R. Article 30-10 implementing that statute and applicable federal law.

- 3. The state's analyses project that the final rates:
 - a. will result in payment, in the aggregate of 93.15% of the Medicaid day weighted average inflated allowable nursing facility costs statewide;
 - will result in a maximum allowable rate of \$124.46; the total average allowable cost is \$109.81; and,
 - c. estimated average rate July 1, 2002 Average payment rate July 1, 2001 Amount of change \$3.56 Percent of change 3.71%
- 4. Estimated annual aggregate expenditures in the Medicaid nursing facility services payment program will increase by approximately \$11 million with the combination of the Phase One and Phase Two rates.
- 5. The state estimates that the final rates will continue to make quality care and services available under the Medicaid State Plan at least to the extent that care and services are available to the general population in the geographic area. The state's analyses indicate:
 - a. service providers operating a total of 314 nursing facilities (representing 97% of all the licensed nursing facilities in Kansas) participate in the Medicaid program, while an additional 44 hospital-based long-term care units are also certified to participate in the Medicaid program;
 - there is at least one Medicaid-certified nursing facility and/or nursing facility for mental health, or Medicaid-certified hospital-based long-term care unit in each of the 105 counties in Kansas;
 - c. the statewide average occupancy rate for nursing facilities participating in Medicaid is 86.6%;
 - d. the statewide average Medicaid occupancy rate for participating facilities is 55.5%; and
- 6. Federal Medicaid regulations at 42 C.F.R. 447.272 impose an aggregate upper payment limit that states may pay for Medicaid nursing facility services. The state's analysis indicates that the final methodology will result in compliance with the federal regulation.

Part One: Phase Two Rates

- 1. The final rates are calculated according to the rate-setting methodology in the Kansas Medicaid State Plan and pending amendments thereto.
- 2. The final rates are calculated according to a methodology which satisfies the requirements of K.S.A. 39-708c(x) and the Department of Social and Rehabilitation Services regulations in K.A.R. Article 30-10 implementing that statute and applicable federal law.
- 3. The State's analyses project that the final rates:
 - a. will result in payment, in the aggregate of 95.43% of the Medicaid day weighted average inflated allowable nursing facility costs statewide;
 - b. will result in a maximum allowable rate of \$121.56; the total average allowable cost is \$109.81; and,
 - c. estimated average rate July 1, 2002 \$101.95 Average payment rate July 1, 2001 \$96.02 Amount of change \$5.93 Percent of change 6.18%

- 4. Estimated annual aggregate expenditures in the Medicaid nursing facility services payment program will increase by approximately \$11 million with the combination of the Phase One and Phase Two rates.
- 5. The state estimates that the final rates would continue to make quality care and services available under the Medicaid State Plan at least to the extent that care and services are available to the general population in the geographic area. The state's analyses indicate:
 - a. service providers operating a total of 314 nursing facilities (representing 97% of all the licensed nursing facilities in Kansas) participate in the Medicaid program, while an additional 44 hospital-based long-term care units are also certified to participate in the Medicaid program;
 - there is at least one Medicaid-certified nursing facility and/or nursing facility for mental health, or Medicaid-certified hospital-based long-term care unit in each of the 105 counties in Kansas;
 - c. the statewide average occupancy rate for nursing facilities participating in Medicaid is 86.6%;
 - d. the statewide average Medicaid occupancy rate for participating facilities is 55.5%; and
 - e. the final rates would cover 97.11 % of the estimated Medicaid health care costs incurred by participating nursing facilities statewide.
- 6. Federal Medicaid regulations at 42 C.F.R. 447.272 impose an aggregate upper payment limit that states may pay for Medicaid nursing facility services. The state's analysis indicates that the final methodology will result in compliance with the federal regulation.

IV. The State's Response to Written Comments on the Published Proposals.

The state received approximately 110 letters with comments to the Notice of Proposed Nursing Facility Medicaid Rates for State Fiscal Year 2003, Methodology for Calculating Proposed Rates, and Rate Justifications; Notice of Intent to Amend the Medicaid State Plan and Request for Comments published in the April 25, 2002 Kansas Register. As a result of the comments, revisions have been made to the final methodology and are incorporated herein. The state thanks the commenters for their interest, efforts and suggestions. The state reviewed, discussed, and considered those comments before approving the final rate-setting methodology and the final per diem rates published in this notice.

V. Notice of Intent to Amend the Medicaid State Plan.

The state intends to submit proposed Medicaid State Plan amendments to CMS on or before September 30, 2002.

> J. G. Scott Budget Director Social and Rehabilitation Services Connie Hubbell Secretary of Aging

INDEX TO ADMINISTRATIVE REGULATIONS

This index lists in numerical order the new, amended and revoked administrative regulations and the volume and page number of the Kansas Register issue in which more information can be found. Temporary regulations are designated with a (T) in the Action column. This cumulative index supplements the 2000 Volumes and 2001 Supplement to the Kansas Administrative Regulations.

AGENCY 1: DEPARTMENT OF ADMINISTRATION

	ADMINISTRATIO	•				
Reg. No.	Action	Register				
1-2-31	Amended	V. 21, p. 767				
1-2-42	Amended	V. 21, p. 767				
1-2-42a	Amended	V. 21, p. 767				
1-2-48	Revoked	V. 21, p. 767				
1-5-8	Amended	V. 20, p. 730				
1-5-9	Amended	V. 20, p. 730				
1-5-19b	Amended	V. 20, p. 730				
1-5-19c	Amended	V. 20, p. 730				
1-5-20	Amended	V. 20, p. 731				
1-5-22	Amended	V. 21, p. 767				
1-5-29	Amended	V. 21, p. 767				
1-6-3	Amended	V. 21, p. 767				
1-6-21	Amended	V. 21, p. 768				
1-6-26a	New	V. 21, p. 768				
1-9-4	Amended	V. 21, p. 768				
1-9-5	Amended	V. 21, p. 769				
1-11-1	Amended	V. 21, p. 770				
1-14-12a	Revoked	V. 21, p. 770				
1-16-18	Amended	V. 21, p. 146				
1-18-1a	Amended	V. 20, p. 1602				
1-45-1	Amended	V. 20, p. 1602				
1-45-7	Amended	V. 20, p. 1603				
1-45-7a	New	V. 20, p. 1603				
ACENCY 4: DEPARTMENT OF						

AGENCY 4: DEPARTMENT OF AGRICULTURE

Reg. No.	Action	Register
4-3-47	Amended	V. 20, p. 861
4-3-49	Amended	V. 20, p. 861
4-3-51	New	V. 20, p. 861
4-10-2j	Amended	V. 20, p. 431
4-10-5	Amended	V. 20, p. 430
4-10-5a	New	V. 20, p. 431
4-25-2		•
through		
4-25-18	New	V. 21, p. 232-235

AGENCY 5: DEPARTMENT OF AGRICULTURE—DIVISION OF WATER RESOURCES

Action

Amended

Reg. No.

7-39-1

5-15-1		
through		
5-15-4	New (T)	V. 21, p. 690-692
5-25-4	Amended	V. 20, p. 294
AGE	NCY 7: SECRET	ARY OF STATE
Reg. No.	Action	Register
7-17-1		
through		
7-17-24	New	V. 20, p. 1524-1528
7-19-1		•
through		
7-19-7	Revoked	V. 20, p. 1528
7-23-13	Amended	V. 21, p. 1056
7-24-2	Amended	V. 20, p. 323
7-25-1	Amended	V. 20, p. 325
7-26-1	Amended	V. 20, p. 325
7-26-2	Amended	V. 20, p. 325
7-28-1	Amended	V. 20, p. 325
7-29-2	Amended	V. 20, p. 325
7-36-4	Amended	V. 20, p. 326
7-37-2	Amended	V. 21, p. 1056
7-38-1	Amended	V. 20, p. 326

Table		alisas iv	egistei			
Through	7-41-1			25-1-15	Revoked	V 21 p 236
Table					nevoked	v. 21, p. 200
DEPARTMENT		New	V. 20, p. 1021-1023			
Reg. No. Action Register Port	AG					
New Color New	D N				Revoked	V. 21, p. 236
97-19 New V 2 P. 1255 253-68 Revoked V 2.1, p. 236 P. 1255 P. 12	•		•			
9-10-33 New					Revoked	V. 21, p. 236
9-19-33 New V. 20, p. 1593 9-18-1 Amended (T) V. 20, p. 1567 9-22-1 New (T) V. 20, p. 1567 9-22-2 New (T) V. 20, p. 1566 9-22-2 New (T) New (T) V. 20, p. 1566 9-22-2 New (T) New (T) V. 20, p. 1566 9-22-2 New (T) New					Revoked	V. 21, p. 236
9.22.4 New (T)	9-10-33a	New				
9.29.12 New (T) V. 20, p. 1568 253-15 Revoked V. 21, p. 236 293-16 Revoked V. 21, p. 236 293-16 Revoked V. 21, p. 236 293-17 Revoked V. 21, p. 236 235-17 Revoked V. 22, p. 235-17 Revoked V. 2					Revoked	V 21 n 236
9.29-12 New						
AGENCY 1s. KANSAS BUREAU CF No.		14011 (1)	v. 20, p. 1000	25-3-16	Revoked	
Action Register Revoked V. 21, p. 236 Revoked V. 21, p. 236 Reg. No. Action Register Reg. No. Amended V. 21, p. 745 Revoked V. 21, p. 185						
Reg. No. Action Register Rev. Rev. No. Action Register Rev. No. Action Register Rev. No. Action Register Reg. No. Action Reg. No. A						
Reg. No.	AG					
10-13-1	Reg No					
10-13-1	_		· ·	_		•
10-20-2a						
through 10-21-6		New				
10-21-6						
REVENUE_DIVISION OF ALCOHOLIC 26-51-6 Amended V. 21, p. 785 Revenue_DIVISION OF ALCOHOLIC 26-11-1 New (I) V. 20, p. 1895 Reg. No. Action Register V. 21, p. 1054 ACTION Reg. No. Action Register Revoked V. 21, p. 181 Revoked V. 21, p. 181 Revoked V. 21, p. 181 Revoked V. 21, p. 182 Revoked V. 20, p. 322 Reg. No. Revoked V. 21, p. 22		Amondod	V 21 p 454-456			V. 21, p. 745
Rey No. Action Register 26-11-2 New (T) V. 20, p. 1895						
BEVERAGE CONTROL 26-11-2 New (I) V. 20, p. 1895						
14-13-15 New V. 21, p. 1055 AGENCY 28: DEPARTMENT OF HEALTH V. 21, p. 1055 AGENCY 16: ATTORNEY GENERAL Reg. No. Action Register 28-4-269 Amended (I) V. 21, p. 497 167-9 Revoked V. 20, p. 1920 28-4-351 Amended (I) V. 21, p. 498 28-4-351 Amended (I) V. 21, p. 498 Amended (I) V. 21, p. 597-616 Amended V. 21, p. 18 Amended (I) V. 21, p. 597-616 Amended V. 21, p. 18 Amended (I) V. 21, p. 597-616 Amended (I) V. 21, p. 597-616 Amended (I) V. 21, p. 19 V. 21, p. 19 V. 21, p. 19 V. 21, p. 19 V. 21, p. 21 V. 21, p. 22 V. 21, p. 21 V. 22, p. 22 V. 23, p. 34 V. 20, p. 322 V. 32, p. 34 V. 32, p.		BEVERAGE C	ONTROL			
1413-15 New V. 21, p. 1055 NegNot Action Register	Reg. No.	Action	Register	26-11-3	New (T)	V. 20, p. 1895
Reg. No. Action Register 28-4-269 Amended (T) V. 21, p. 498				AGENC		
Reg. No. Action Register 284-269 Amended (T) V. 21, p. 497				D N		
16-7-1				_		_
through 167-99 Revoked V. 20, p. 1920 284-357 Amended (T) V. 21, p. 590 1667-99 Revoked V. 20, p. 1920 284-576 Mrough V. 21, p. 188 Mrough V. 21, p. 198 Mrough V. 21, p. 199 V. 21, p. 199 V. 21, p. 219		retion	Register			
AGENCY 17: STATE BANK COMMISSIONER See New (T) V. 21, p. 597-616						
Reg. No. Action Register 284-596 New (T) V. 21, p. 597-616		Revoked	V. 20, p. 1920		(-)	1
17-11-14	AGENCY 1	17: STATE BAN	IK COMMISSIONER		N T (TD)	T. 04 FOE (4)
17-11-18	_		· ·		New (1)	V. 21, p. 597-616
T-11-19						
17-11-21					Revoked	V. 20, p. 322
17-16-2						
17-22-3			V. 21, p. 19			
17-23-6					Revokeu	v. 20, p. 322
17-23-8						
17-23-9 Amended			V. 21, p. 21		Revoked	V. 20, p. 322
17-23-14 Amended V. 21, p. 25 28-10-108 Revoked V. 20, p. 322 17-24-15 Revoked V. 21, p. 26 28-15-35 Amended V. 20, p. 725 17-24-2 Amended V. 20, p. 1847 28-15-36 Amended V. 20, p. 728 17-24-3 New V. 21, p. 212 28-15-36 Amended V. 20, p. 728 17-24-3 New V. 21, p. 212 28-15-36 Amended V. 20, p. 728 17-24-3 New V. 21, p. 212 28-15-36 Amended V. 20, p. 729 17-24-3 New V. 20, P. 1212 28-15-36 Amended V. 20, p. 729 17-24-3 New V. 20, P. 212 28-15-36 Amended V. 20, p. 729 17-24-3 New V. 20, P. 212 28-15-36 Amended V. 20, p. 729 17-24-3 New V. 20, P. 212 28-16-28b Amended V. 20, p. 729 18-20-8-1 Hrough 28-16-28b Amended V. 20, p. 120 19-20-8-1 Revoked V. 20, p. 1921 28-16-36 Amended V. 20, p. 1277-1279 19-20-10-1 Revoked V. 20, p. 1921 28-16-57 Revoked V. 20, p. 1921 20-11-1 Revoked V. 20, p. 1921 28-16-58 Amended V. 20, p. 1280 20-13-2 Revoked V. 20, p. 1921 28-16-60 Amended V. 20, p. 1280 20-13-3 Revoked V. 20, p. 1921 28-16-79 Revoked V. 20, p. 1280 20-13-3 Revoked V. 20, p. 1921 AGENCY 22: STATE FIRE MARSHAL 28-16-79 Revoked V. 20, p. 322 Reg. No. Action Register 28-16-82 Revoked V. 20, p. 322 22-24-18 New (T) V. 20, p. 1724-1727 28-19-79 Revoked V. 20, p. 322 22-24-18 New (T) V. 20, p. 1747-150 28-29-18 Revoked V. 20, p. 322 Reg. No. Action Register 28-34-9a Amended V. 20, p. 1061 28-34-18 Revoked V. 20, p. 107 23-1-11 Revoked V. 20, p. 1061 28-34-26 Revoked V. 20, p. 323 Reg. No. Action Register 28-34-9a Amended V. 20, p. 107 23-1-11 Revoked V. 20, p. 1061 28-34-26 Revoked V. 20, p. 323 Reg. No. Action Register 28-34-9a Amended V. 20, p. 323 Reg. No. Action Register 28-34-30 Amended V. 20, p. 323 Reg. No. Action Register 28-34-32b Amended						
17-23-15					Revoked	V 20 n 322
17-24-2						
AGENCY 20: CRIME VICTIMS		Amended		28-15-36		
Reg. No. Action Register Self-28b Amended V. 20, p. 1264-1270						
Reg. No. Action Register 28-16-28c Amended V. 20, p. 1264-1270					Amended	V. 20, p. 729
20-8-1						
through 20-8-4 Revoked V. 20, p. 1921 20-10-1 Revoked V. 20, p. 1921 20-10-2 Revoked V. 20, p. 1921 20-10-1 Revoked V. 20, p. 1921 20-11-1 Revoked V. 20, p. 1921 20-11-1 Revoked V. 20, p. 1921 20-11-2 Revoked V. 20, p. 1921 20-11-2 Revoked V. 20, p. 1921 20-13-2 Revoked V. 20, p. 1921 20-13-3 Revoked V. 20, p. 1921 20-13-6 Reyoked V. 20, p. 1921 20-13-1 Revoked V. 20, p. 1921 20-13-2 Revoked V. 20, p. 1921 20-13-3 Revoked V. 20, p. 1921 20-13-1 Revoked V. 20, p. 1921 20-13-3 Revoked V. 20, p. 1921 20-13-4 Revoked V. 20, p. 1921 20-13-5 Reyoked V. 20, p. 1921 20-13-6 Reg. No. Action Register 20-13-7 Revoked V. 20, p. 1724-1727 20-14-1 V. 20, p. 492 20-14-1 V. 20, p. 1724-1727 20-14-1 V. 20, p. 1921 20-15-1-3 Revoked V. 21, p. 1061 20-15-15-1 Revoked V. 20, p. 1061 20-15-15-15-15-15-15-15-15-15-15-15-15-15-			9	28-16-28e	Amended	V. 20, p. 1264-1270
20-8-4 Revoked V. 20, p. 1921 Use of the part of the						
20-10-2 Revoked V. 20, p. 1921 28-16-57 Revoked V. 20, p. 322 20-11-1 Revoked V. 20, p. 1921 28-16-58 Amended V. 20, p. 1279 20-11-2 Revoked V. 20, p. 1921 28-16-60 Amended V. 20, p. 1280 20-13-3 Revoked V. 20, p. 1921 28-16-76 20-13-3 Revoked V. 20, p. 1921 through AGENCY 22: STATE FIRE MARSHAL 28-16-79 Revoked V. 20, p. 322 Reg. No. Action Register 28-16-82 Revoked V. 20, p. 322 22-24-1 Reg. No. W. 10 V. 20, p. 1724-1727 28-19-79 Revoked V. 20, p. 492 22-24-18 New (T) V. 20, p. 1724-1727 28-19-719 New V. 20, p. 322 22-24-18 New V. 21, p. 147-150 28-29-18 Revoked V. 21, p. 310 46-22-24-18 New V. 21, p. 147-150 28-29-29 Amended V. 21, p. 310 46-24-18 New V. 21, p. 147-150 28-29-201 New V. 21, p. 310 46-24-18 AND PARKS Register 28-34-1a Amended V. 20, p. 1755 AND PARKS Reg. No. Action Register 28-34-9 Amended V. 20, p. 107 23-1-11 Revoked V. 20, p. 1061 28-34-21 Revoked V. 20, p. 323 AGENCY 25: STATE GRAIN 28-34-26 Revoked V. 20, p. 323 INSPECTION DEPARTMENT (P. 20, p. 1061 28-34-27 Revoked V. 20, p. 323 INSPECTION DEPARTMENT (P. 20, p. 1061 28-34-28 Revoked V. 20, p. 323 INSPECTION DEPARTMENT (P. 20, p. 1061 28-34-28 Revoked V. 20, p. 323 Reg. No. Action Register 28-34-30 Revoked V. 20, p. 323 Reg. No. Action Register 28-34-30 Revoked V. 20, p. 323 Reg. No. Action Register 28-34-30 Revoked V. 20, p. 323 Reg. No. Action Register 28-34-30 Revoked V. 20, p. 323 Reg. No. Action Register 28-34-31 Amended V. 20, p. 323 Reg. No. Action Register 28-34-35 Amended V. 20, p. 323 Reg. No. Action Register 28-34-35 Amended V. 20, p. 323 Reg. No. Action Register 28-34-35 Amended V. 20, p. 323 Reg. No. Action Register 28-34-35 Amended V. 20, p. 323 Reg. No. Action Register 28-34-35 Amended V. 20, p. 454 25-1-6 Revoked V. 21, p. 235, 236 Revoked V. 20, p. 455 25-1-6 Revoked V. 21, p. 235, 236 Revoked V. 20, p. 455 25-1-6 Revoked V. 21, p. 235, 236 Revoked V. 20, p. 455 25-1-6 Revoked V. 21, p. 235, 236 Revoked V. 20, p. 455 25-1-6 Revoked V. 21, p. 235, 236 Revoked V. 20, p. 455 25-1-6 Revoked V. 21, p. 235, 236 Revoked V. 20,					Amended	V 20 p 1277-1279
20-11-1						
20-11-2			V. 20, p. 1921			
20-13-3 Revoked V. 20, p. 1921 Sandard V. 20, p. 1921 Care	20-11-2	Revoked	V. 20, p. 1921		Amended	V. 20, p. 1280
AGENCY 22: STATE FIRE MARSHAL 28-16-89 Revoked V. 20, p. 322 Reg. No. Action Register 28-16-82 Revoked V. 20, p. 322 22-24-1 28-19-79 Revoked V. 20, p. 1523 22-24-18 New (T) V. 20, p. 1724-1727 28-19-202 Amended V. 20, p. 322 22-24-1 New (T) V. 20, p. 1724-1727 28-19-719 New V. 20, p. 322 22-24-1 Revoked V. 21, p. 310 New V. 21, p. 310 4GENCY 23: DEPARTMENT OF WILDLIFE AND PARKS 28-29-29 Amended V. 21, p. 310 4GENCY 23: DEPARTMENT OF WILDLIFE AND PARKS 28-34-1a Amended V. 20, p. 1755 4GENCY 23: DEPARTMENT OF WILDLIFE AND PARKS 28-34-1a Amended V. 20, p. 107 23-1-11 Revoked V. 20, p. 1061 28-34-20 Amended V. 20, p. 107 23-8-27 Revoked V. 20, p. 1061 28-34-21 Revoked V. 20, p. 323 AGENCY 25: STATE GRAIN 1 28-34-28 Revoked V. 20, p. 323 (By Department of Agriculture)						
Reg. No. Action Register 28-16-82 28-17-6 28-17-6 Amended Revoked V. 20, p. 322 22-24-1 through 28-19-79 Revoked V. 20, p. 1523 22-24-18 New (T) V. 20, p. 1724-1727 28-19-702 Amended V. 20, p. 322 22-24-1 through 28-29-18 Revoked V. 21, p. 310 22-24-18 New V. 21, p. 147-150 28-29-29 Amended V. 21, p. 310 22-24-18 New V. 21, p. 147-150 28-29-29 Amended V. 21, p. 310 AGENCY 23: DEPARTMENT OF WILDLIFE AND PARKS 28-34-1a Amended V. 20, p. 1755 Reg. No. Action Register 28-34-6a Amended V. 20, p. 106 23-1-11 Revoked V. 20, p. 1061 28-34-21 Revoked V. 20, p. 323 23-8-27 Revoked V. 20, p. 1061 28-34-21 Revoked V. 20, p. 323 AGENCY 25: STATE GRAIN AGENCY 25: STATE GRAIN 28-34-27 Revoked V. 20, p. 323 (By Department of Agriculture) 28-34-30 Revoked V. 20, p. 323 (By Department of Agriculture) 28-34-30 Amended V. 20, p. 453 25-1-3 Atrough Action Register 28-34-31 Amended V. 20, p. 453 25-					Revoked	V. 20, p. 322
22-24-1				28-16-82	Revoked	
through 22-24-18 New (T) V. 20, p. 1724-1727 28-19-202 Amended V. 20, p. 322 22-24-18 New (T) V. 20, p. 1724-1727 28-19-719 New V. 20, p. 492 22-24-18 New V. 21, p. 147-150 28-29-18 Revoked V. 21, p. 310 22-24-18 New V. 21, p. 147-150 28-29-29 Amended V. 21, p. 310 AGENCY 23: DEPARTMENT OF WILDLIFE AND PARKS 28-34-1a Amended V. 20, p. 1755 AND PARKS 28-34-6a Amended V. 20, p. 106 Reg. No. Action Register 28-34-1a Amended V. 20, p. 107 23-1-11 Revoked V. 20, p. 1061 28-34-21 Revoked V. 20, p. 323 23-8-27 Revoked V. 20, p. 1061 28-34-21 Revoked V. 20, p. 323 AGENCY 25: STATE GRAIN 28-34-27 Revoked V. 20, p. 323 INSPECTION DEPARTMENT 28-34-28 Revoked V. 20, p. 323 (By Department of Agriculture) 28-34-30 Revoked V. 20, p. 323 (By Department of Agriculture) 28-34-30 Revoked V. 20, p. 323 through Revoked V. 21, p. 235, 236 28-34-51 Amended V. 20, p. 455 25-1-6 Revoked V. 21, p. 235, 236	•	11011011	register			
22-24-18						
28-29-18 Revoked V. 21, p. 310		New (T)	V. 20, p. 1724-1727			
22-24-18 New V. 21, p. 147-150 28-29-220 New V. 21, p. 310					Revoked	
AGENCY 23: DEPARTMENT OF WILDLIFE AND PARKS Reg. No. Action Register 28-34-6a Amended V. 20, p. 106 23-1-11 Revoked V. 20, p. 1061 28-34-21 Revoked V. 20, p. 323 23-8-27 Revoked V. 20, p. 1061 28-34-21 Revoked V. 20, p. 323 AGENCY 25: STATE GRAIN 28-34-27 Revoked V. 20, p. 323 INSPECTION DEPARTMENT 28-34-28 Revoked V. 20, p. 323 (By Department of Agriculture) 28-34-30 Revoked V. 20, p. 323 Reg. No. Action Register 28-34-32 Amended V. 20, p. 107 25-1-3 28-34-51 Amended V. 20, p. 455 through 28-34-51 Amended V. 20, p. 455		New	V 21 p 147-150			
AND PARKS 28-34-6a Amended V. 20, p. 106						
Reg. No. Action Register 28-34-9a Amended V. 20, p. 107 23-1-11 Revoked V. 20, p. 1061 28-34-21 Revoked V. 20, p. 323 23-8-27 Revoked V. 20, p. 1061 28-34-26 Revoked V. 20, p. 323 AGENCY 25: STATE GRAIN 28-34-27 Revoked V. 20, p. 323 INSPECTION DEPARTMENT 28-34-28 Revoked V. 20, p. 323 (By Department of Agriculture) 28-34-30 Revoked V. 20, p. 323 Reg. No. Action Register 28-34-3b Amended V. 20, p. 107 25-1-3 28-34-50 Amended V. 20, p. 453 45-1-6 Revoked V. 21, p. 235, 236 28-34-51 Revoked V. 20, p. 455						
23-1-11 Revoked V. 20, p. 1061 28-34-21 Revoked V. 20, p. 323 23-8-27 Revoked V. 20, p. 1061 28-34-26 Revoked V. 20, p. 323 AGENCY 25: STATE GRAIN 28-34-27 Revoked V. 20, p. 323 INSPECTION DEPARTMENT 28-34-28 Revoked V. 20, p. 323 (By Department of Agriculture) 28-34-28 Revoked V. 20, p. 323 Reg. No. Action Register 28-34-32b Amended V. 20, p. 107 25-1-3 28-34-51 Amended V. 20, p. 454 25-1-6 Revoked V. 21, p. 235, 236 28-34-52 Revoked V. 20, p. 455	Reg. No.	Action	Register			
AGENCY 25: STATE GRAIN 28-34-27 Revoked V. 20, p. 323 INSPECTION DEPARTMENT 28-34-28 Revoked V. 20, p. 323 (By Department of Agriculture) 28-34-30 Revoked V. 20, p. 323 Reg. No. Action Register 28-34-32b Amended V. 20, p. 107 25-1-3 28-34-50 Amended V. 20, p. 453 through 28-34-51 Amended V. 20, p. 454 25-1-6 Revoked V. 21, p. 235, 236 28-34-52 Revoked V. 20, p. 455				28-34-21	Revoked	V. 20, p. 323
INSPECTION DEPARTMENT 28-34-28 Revoked V. 20, p. 323 Reyoked V. 20, p. 107 Register 28-34-32b Amended V. 20, p. 107 Reyoked V. 20, p. 453 Reyoked V. 20, p. 454 Reyoked V. 20, p. 454 Reyoked V. 20, p. 455 Reyoked V. 20, p. 323 Reyoked V. 20, p. 323 Reyoked V. 20, p. 323 Reyoked V. 20, p. 455 Reyoked						
(By Department of Agriculture) 28-34-30 Revoked V. 20, p. 323 Reg. No. Action Register 28-34-32b Amended V. 20, p. 107 25-1-3 28-34-50 Amended V. 20, p. 453 through 28-34-51 Amended V. 20, p. 454 25-1-6 Revoked V. 21, p. 235, 236 28-34-52 Revoked V. 20, p. 455						
Reg. No. Action Register 28-34-32b Amended V. 20, p. 107 25-1-3 28-34-50 Amended V. 20, p. 453 through 28-34-51 Amended V. 20, p. 454 25-1-6 Revoked V. 21, p. 235, 236 28-34-52 Revoked V. 20, p. 455						
25-1-3 through 28-34-50 Amended V. 20, p. 453 28-34-51 Amended V. 20, p. 454 25-1-6 Revoked V. 21, p. 235, 236 28-34-52 Revoked V. 20, p. 455				28-34-32b	Amended	V. 20, p. 107
25-1-6 Revoked V. 21, p. 235, 236 28-34-52 Revoked V. 20, p. 455	25-1-3					
		Doveload	V 21 - 225 227			v. 20, p. 454 V 20 p. 455

V. 20, p. 1566

					O			
28-34-52a	New	V. 20, p. 455	30-64-22	Amended	V. 21, p. 80	44-12-201		
28-34-52b	New	V. 20, p. 455	30-64-23	Amended	V. 21, p. 80	through		
28-34-53	Amended	V. 20, p. 456	30-64-30	Amended	V. 21, p. 81	44-12-205	Amended	V. 21, p. 118
28-34-54	Amended	V. 20, p. 456	30-64-31	Amended	V. 21, p. 81	44-12-210	Amended	V. 21, p. 118
28-34-55 28-34-55a	Revoked	V. 20, p. 457 V. 20, p. 457	30-64-32	Amended	V. 21, p. 82	44-12-303 44-12-305	Amended Amended	V. 21, p. 118 V. 21, p. 118
28-34-56	New Revoked	V. 20, p. 457 V. 20, p. 457	30-64-34	Revoked	V. 21, p. 82	44-12-306	Amended	V. 21, p. 118 V. 21, p. 119
28-34-56a	New	V. 20, p. 457	AGE	NCY 40: KANSAS DEPARTME		44-12-307	Amended	V. 21, p. 119
28-34-57	Amended	V. 20, p. 457	Dag Ma			44-12-309	Amended	V. 21, p. 119
28-34-58	Revoked	V. 20, p. 458	Reg. No.	Action	Register	44-12-310	Amended	V. 21, p. 119
28-34-58a	New	V. 20, p. 458	40-1-8	Revoked	V. 20, p. 946	44-12-312 44-12-313	Amended Amended	V. 21, p. 119 V. 21, p. 119
28-34-59 28-34-59a	Revoked New	V. 20, p. 459 V. 20, p. 459	40-1-13 40-1-30	Revoked Revoked	V. 20, p. 946 V. 20, p. 723	44-12-314	Amended	V. 21, p. 119 V. 21, p. 119
28-34-60	Revoked	V. 20, p. 459	40-1-37	Amended	V. 20, p. 1343	44-12-318	Amended	V. 21, p. 120
28-34-60a	New	V. 20, p. 459	40-1-42	Amended	V. 20, p. 723	44-12-320	Revoked	V. 21, p. 120
28-34-61	Revoked	V. 20, p. 460	40-1-43	Amended	V. 21, p. 451	44-12-321	Amended	V. 21, p. 120
28-34-61a	New	V. 20, p. 460	40-1-43	Amended (T)	V. 20, p. 1896	44-12-325 44-12-326	Amended Revoked	V. 21, p. 120 V. 21, p. 120
28-34-62a 28-34-75	Amended	V. 20, p. 460	40-1-46	Amended	V. 21, p. 212	44-12-327	Amended	V. 21, p. 120 V. 21, p. 120
through			40-1-47 40-1-48	New Amended	V. 21, p. 588 V. 21, p. 1056	44-12-328	Amended	V. 21, p. 120
28-34-93	Revoked	V. 20, p. 323	40-2-22	Revoked	V. 21, p. 1636 V. 21, p. 589	44-12-401	Amended	V. 21, p. 120
28-34-94a	Revoked	V. 20, p. 323	40-3-29	Revoked	V. 20, p. 946	44-12-501	Amended	V. 21, p. 121
28-36-30	Amended (T)	V. 20, p. 1122	40-4-35	Amended	V. 20, p. 1307	44-12-503 44-12-504	Amended Amended	V. 21, p. 121 V. 21, p. 121
28-36-30	Amended	V. 20, p. 1675	40-4-37	Amended	V. 21, p. 741	44-12-505b	Amended	V. 21, p. 121 V. 21, p. 121
28-36-60 28-36-60	New (T) New	V. 20, p. 1122 V. 20, p. 1675	40-4-37s	New	V. 21, p. 743	44-12-601	Amended	V. 21, p. 121
28-36-120	New (T)	V. 20, p. 1073 V. 20, p. 1122	40-4-41	Amended	V. 20, p. 946	44-12-602	Amended	V. 21, p. 123
28-36-120	New	V. 20, p. 1675	40-4-41b through			44-12-702	Amended	V. 21, p. 123
28-39-144	Amended	V. 20, p. 1756	40-4-41g	Amended	V. 20, p. 949-953	44-12-801 44-12-902	Amended Amended	V. 21, p. 123 V. 21, p. 123
28-39-155	Amended	V. 20, p. 1758	40-4-41h	New	V. 20, p. 953	44-12-1002	Amended	V. 21, p. 123 V. 21, p. 123
28-39-410	Revoked	V. 20, p. 323	40-4-41i	New	V. 20, p. 954	44-12-1306	Amended	V. 21, p. 123
28-55-3 28-55-5	Amended Amended	V. 21, p. 311 V. 21, p. 311	40-4-41j	New	V. 20, p. 954	44-12-1307	Amended	V. 21, p. 124
28-59-1	Amended	v. 21, p. 311	40-5-106	Revoked	V. 20, p. 1161	44-13-101	Amended	V. 21, p. 151
through			40-5-111 40-7-6	Revoked Revoked	V. 20, p. 1161 V. 20, p. 1161	44-13-104	Revoked	V. 21, p. 151
28-59-5	Amended	V. 20, p. 295, 296	40-9-100	Amended	V. 20, p. 1101 V. 20, p. 954	44-13-105 44-13-106	Amended Amended	V. 21, p. 151 V. 21, p. 151
28-59-5a	Amended	V. 20, p. 297	40-12-1	Revoked	V. 20, p. 723	44-13-201	Amended	V. 21, p. 151 V. 21, p. 152
28-59-6	Amended	V. 20, p. 297		ENCY 44: DEPAR	*	44-13-201b	Amended	V. 21, p. 153
28-59-7 28-59-8	Amended Amended	V. 20, p. 298 V. 20, p. 298		CORRECTIO		44-13-202	Amended	V. 21, p. 153
28-61-1	7 Interface	v. 20, p. 230	Reg. No.	Action	Register	44-13-302a 44-13-304	Revoked Revoked	V. 21, p. 153
through			44-4-103	Revoked	V. 21, p. 309	44-13-304	New	V. 21, p. 153 V. 21, p. 154
28-61-10	Amended	V. 20, p. 298-303	44-4-104	Revoked	V. 21, p. 309	44-13-307	New	V. 21, p. 154
28-61-11	New	V. 20, p. 304	44-4-106		··/ F· ···	44-13-401	Amended	V. 21, p. 154
Α	GENCY 30: SOCI	IAL AND	through	D 1 1	•	44-13-401a	Revoked	V. 21, p. 154
A RE	GENCY 30: SOCI HABILITATION	IAL AND SERVICES	through 44-4-109	Revoked	V. 21, p. 309	44-13-401a 44-13-402	Revoked Amended	V. 21, p. 154 V. 21, p. 154
A RE Reg. No.	GENCY 30: SOCI HABILITATION Action	IAL AND SERVICES Register	through 44-4-109 44-5-101	Revoked	V. 21, p. 309 V. 21, p. 309	44-13-401a 44-13-402 44-13-403	Revoked Amended Amended	V. 21, p. 154 V. 21, p. 154 V. 21, p. 155
Reg. No. 30-4-64	GENCY 30: SOCI HABILITATION Action Amended	IAL AND SERVICES Register V. 20, p. 490	through 44-4-109		V. 21, p. 309	44-13-401a 44-13-402	Revoked Amended	V. 21, p. 154 V. 21, p. 154 V. 21, p. 155 V. 21, p. 156 V. 21, p. 157
A RE Reg. No. 30-4-64 30-4-90	AGENCY 30: SOCI HABILITATION Action Amended Amended	IAL AND SERVICES Register V. 20, p. 490 V. 21, p. 1005	through 44-4-109 44-5-101 44-5-103 44-5-107 through	Revoked Revoked	V. 21, p. 309 V. 21, p. 309 V. 21, p. 309	44-13-401a 44-13-402 44-13-403 44-13-404 44-13-405a 44-13-406	Revoked Amended Amended Amended Amended Amended	V. 21, p. 154 V. 21, p. 154 V. 21, p. 155 V. 21, p. 156 V. 21, p. 157 V. 21, p. 158
A RE. Reg. No. 30-4-64 30-4-90 30-5-58	GENCY 30: SOCI HABILITATION Action Amended Amended Amended	RAL AND SERVICES Register V. 20, p. 490 V. 21, p. 1005 V. 20, p. 1023	through 44-4-109 44-5-101 44-5-103 44-5-107 through 44-5-110	Revoked Revoked Revoked	V. 21, p. 309 V. 21, p. 309 V. 21, p. 309 V. 21, p. 309	44-13-401a 44-13-402 44-13-403 44-13-404 44-13-406 44-13-408	Revoked Amended Amended Amended Amended Amended Amended	V. 21, p. 154 V. 21, p. 154 V. 21, p. 155 V. 21, p. 155 V. 21, p. 157 V. 21, p. 158 V. 21, p. 158
A RE Reg. No. 30-4-64 30-4-90	AGENCY 30: SOCI HABILITATION Action Amended Amended	IAL AND SERVICES Register V. 20, p. 490 V. 21, p. 1005	through 44-4-109 44-5-101 44-5-103 44-5-107 through 44-5-110 44-5-113	Revoked Revoked Revoked Revoked	V. 21, p. 309 V. 21, p. 309	44-13-401a 44-13-402 44-13-403 44-13-404 44-13-406 44-13-408 44-13-409	Revoked Amended Amended Amended Amended Amended Amended Amended	V. 21, p. 154 V. 21, p. 154 V. 21, p. 155 V. 21, p. 156 V. 21, p. 157 V. 21, p. 158 V. 21, p. 158 V. 21, p. 158
A RE. Reg. No. 30-4-64 30-4-90 30-5-58 30-5-64 30-5-76 30-5-92	AGENCY 30: SOCI HABILITATION Action Amended Amended Amended Amended Amended Amended	IAL AND SERVICES Register V. 20, p. 490 V. 21, p. 1005 V. 20, p. 1023 V. 20, p. 1393 V. 20, p. 1846 V. 20, p. 1029	through 44-4-109 44-5-101 44-5-103 44-5-107 through 44-5-110 44-5-113 44-5-114	Revoked Revoked Revoked Revoked Revoked	V. 21, p. 309 V. 21, p. 309	44-13-401a 44-13-402 44-13-403 44-13-404 44-13-406 44-13-408	Revoked Amended Amended Amended Amended Amended Amended	V. 21, p. 154 V. 21, p. 154 V. 21, p. 155 V. 21, p. 156 V. 21, p. 157 V. 21, p. 158 V. 21, p. 158 V. 21, p. 158 V. 21, p. 158
A RE Reg. No. 30-4-64 30-4-90 30-5-58 30-5-64 30-5-76 30-5-92 30-5-94	AGENCY 30: SOCI HABILITATION Action Amended Amended Amended Amended Amended Amended Amended Amended	IAL AND SERVICES Register V. 20, p. 490 V. 21, p. 1005 V. 20, p. 1023 V. 20, p. 1393 V. 20, p. 1846 V. 20, p. 1029 V. 20, p. 1030	through 44-4-109 44-5-101 44-5-103 44-5-107 through 44-5-110 44-5-113 44-5-114 44-7-102	Revoked Revoked Revoked Revoked Revoked Revoked	V. 21, p. 309 V. 21, p. 309	44-13-401a 44-13-402 44-13-403 44-13-405a 44-13-406 44-13-408 44-13-501 44-13-502a 44-13-506	Revoked Amended Amended Amended Amended Amended Amended Amended Amended	V. 21, p. 154 V. 21, p. 154 V. 21, p. 155 V. 21, p. 156 V. 21, p. 157 V. 21, p. 158 V. 21, p. 158 V. 21, p. 158
A RE. Reg. No. 30-4-64 30-4-90 30-5-58 30-5-64 30-5-76 30-5-92 30-5-94 30-5-100	AGENCY 30: SOCI HABILITATION Action Amended Amended Amended Amended Amended Amended Amended Amended Amended Amended	RAL AND SERVICES Register V. 20, p. 490 V. 21, p. 1005 V. 20, p. 1023 V. 20, p. 1393 V. 20, p. 1846 V. 20, p. 1029 V. 20, p. 1030 V. 20, p. 1846	through 44-4-109 44-5-101 44-5-103 44-5-107 through 44-5-110 44-5-113 44-5-114	Revoked Revoked Revoked Revoked Revoked	V. 21, p. 309 V. 21, p. 309	44-13-401a 44-13-402 44-13-403 44-13-405a 44-13-406 44-13-409 44-13-501 44-13-502a 44-13-506 through	Revoked Amended Amended Amended Amended Amended Amended Amended Amended	V. 21, p. 154 V. 21, p. 154 V. 21, p. 155 V. 21, p. 156 V. 21, p. 157 V. 21, p. 158 V. 21, p. 158
A RE. Reg. No. 30-4-64 30-4-90 30-5-58 30-5-64 30-5-76 30-5-92 30-5-94 30-5-100 30-5-101	AGENCY 30: SOCI HABILITATION Action Amended Amended Amended Amended Amended Amended Amended Amended Amended Amended Amended Revoked	RAL AND SERVICES Register V. 20, p. 490 V. 21, p. 1005 V. 20, p. 1023 V. 20, p. 1393 V. 20, p. 1846 V. 20, p. 1029 V. 20, p. 1030 V. 20, p. 1030 V. 20, p. 1846 V. 21, p. 1007	through 44-4-109 44-5-101 44-5-103 44-5-107 through 44-5-113 44-5-114 44-7-102 44-7-103 44-7-105 44-7-106	Revoked Revoked Revoked Revoked Revoked Revoked Revoked Revoked Revoked	V. 21, p. 309 V. 21, p. 309	44-13-401a 44-13-402 44-13-403 44-13-405a 44-13-406 44-13-409 44-13-501 44-13-502a 44-13-509	Revoked Amended Amended Amended Amended Amended Amended Amended Amended Amended	V. 21, p. 154 V. 21, p. 154 V. 21, p. 155 V. 21, p. 156 V. 21, p. 157 V. 21, p. 158
A RE. Reg. No. 30-4-64 30-4-90 30-5-58 30-5-64 30-5-76 30-5-92 30-5-94 30-5-100 30-5-101 30-5-108	AGENCY 30: SOCI HABILITATION Action Amended Amended Amended Amended Amended Amended Amended Amended Amended Amended	RAL AND SERVICES Register V. 20, p. 490 V. 21, p. 1005 V. 20, p. 1023 V. 20, p. 1393 V. 20, p. 1846 V. 20, p. 1029 V. 20, p. 1030 V. 20, p. 1846 V. 21, p. 1007 V. 20, p. 491	through 44-4-109 44-5-101 44-5-107 through 44-5-110 44-5-114 44-7-102 44-7-103 44-7-105 44-7-106 44-7-107	Revoked Revoked Revoked Revoked Revoked Revoked Revoked Revoked Revoked	V. 21, p. 309 V. 21, p. 309	44-13-401a 44-13-402 44-13-403 44-13-405a 44-13-406 44-13-408 44-13-501 44-13-502a 44-13-506 through 44-13-601	Revoked Amended Amended Amended Amended Amended Amended Amended Amended Amended	V. 21, p. 154 V. 21, p. 154 V. 21, p. 155 V. 21, p. 156 V. 21, p. 157 V. 21, p. 158
A RE. Reg. No. 30-4-64 30-4-90 30-5-58 30-5-64 30-5-76 30-5-92 30-5-94 30-5-100 30-5-101 30-5-300 30-6-88	AGENCY 30: SOCI HABILITATION Action Amended Amended Amended Amended Amended Amended Amended Amended Amended Amended Amended Amended Amended Amended Amended	RAL AND SERVICES Register V. 20, p. 490 V. 21, p. 1005 V. 20, p. 1023 V. 20, p. 1393 V. 20, p. 1846 V. 20, p. 1030 V. 20, p. 1030 V. 20, p. 1030 V. 20, p. 1846 V. 21, p. 1007 V. 21, p. 1007 V. 21, p. 1007 V. 21, p. 1007	through 44-4-109 44-5-101 44-5-107 through 44-5-110 44-5-113 44-5-114 44-7-102 44-7-105 44-7-105 44-7-107 44-7-109	Revoked Revoked Revoked Revoked Revoked Revoked Revoked Revoked Revoked Revoked	V. 21, p. 309 V. 21, p. 309	44-13-401a 44-13-402 44-13-403 44-13-405a 44-13-406 44-13-409 44-13-501 44-13-502a 44-13-509	Revoked Amended Amended Amended Amended Amended Amended Amended Amended Amended	V. 21, p. 154 V. 21, p. 154 V. 21, p. 155 V. 21, p. 156 V. 21, p. 157 V. 21, p. 158
A RE. Reg. No. 30-4-64 30-4-90 30-5-58 30-5-64 30-5-76 30-5-94 30-5-100 30-5-101 30-5-300 30-6-88 30-6-89	AGENCY 30: SOCI HABILITATION Action Amended	RAL AND SERVICES Register V. 20, p. 490 V. 21, p. 1005 V. 20, p. 1023 V. 20, p. 1393 V. 20, p. 1846 V. 20, p. 1029 V. 20, p. 1030 V. 20, p. 1030 V. 20, p. 1846 V. 21, p. 1007 V. 21, p. 1007 V. 21, p. 1007 V. 21, p. 1010 V. 20, p. 1394	through 44-4-109 44-5-101 44-5-103 44-5-107 through 44-5-113 44-5-114 44-7-102 44-7-105 44-7-106 44-7-107 44-7-109 44-7-112	Revoked Revoked Revoked Revoked Revoked Revoked Revoked Revoked Revoked Revoked	V. 21, p. 309 V. 21, p. 309	44-13-401a 44-13-402 44-13-403 44-13-405a 44-13-406 44-13-409 44-13-501 44-13-502a 44-13-509 44-13-601 44-13-603 44-13-603 44-13-610 44-13-701	Revoked Amended Amended Amended Amended Amended Amended Amended Amended Amended Amended	V. 21, p. 154 V. 21, p. 154 V. 21, p. 155 V. 21, p. 156 V. 21, p. 157 V. 21, p. 158
A RE. Reg. No. 30-4-64 30-4-90 30-5-58 30-5-64 30-5-76 30-5-92 30-5-94 30-5-100 30-5-101 30-5-300 30-6-88 30-6-89 30-6-94	AGENCY 30: SOCI HABILITATION Action Amended Revoked Amended New New Amended	RAL AND SERVICES Register V. 20, p. 490 V. 21, p. 1005 V. 20, p. 1023 V. 20, p. 1393 V. 20, p. 1393 V. 20, p. 1029 V. 20, p. 1030 V. 20, p. 1030 V. 20, p. 1030 V. 20, p. 1846 V. 21, p. 1007 V. 20, p. 491 V. 21, p. 1007 V. 21, p. 1010 V. 20, p. 1394 V. 21, p. 506	through 44-4-109 44-5-101 44-5-103 44-5-107 through 44-5-113 44-5-114 44-7-102 44-7-105 44-7-106 44-7-107 44-7-109 44-7-112 44-7-114	Revoked Revoked Revoked Revoked Revoked Revoked Revoked Revoked Revoked Revoked Revoked Revoked	V. 21, p. 309 V. 21, p. 309	44-13-401a 44-13-402 44-13-403 44-13-404 44-13-405a 44-13-409 44-13-501 44-13-502a 44-13-506 through 44-13-603 44-13-603 44-13-610 44-13-701 through	Revoked Amended Amended Amended Amended Amended Amended Amended Amended Amended Amended Amended Amended	V. 21, p. 154 V. 21, p. 154 V. 21, p. 155 V. 21, p. 156 V. 21, p. 157 V. 21, p. 158 V. 21, p. 159
A RE. Reg. No. 30-4-64 30-4-90 30-5-58 30-5-64 30-5-76 30-5-92 30-5-94 30-5-100 30-5-101 30-5-300 30-6-88 30-6-89 30-6-94 30-6-103	AGENCY 30: SOCI HABILITATION Action Amended Newoked New New Amended Amended Amended	RAL AND SERVICES Register V. 20, p. 490 V. 21, p. 1005 V. 20, p. 1023 V. 20, p. 1393 V. 20, p. 1846 V. 20, p. 1029 V. 20, p. 1030 V. 20, p. 1846 V. 21, p. 1007 V. 20, p. 491 V. 21, p. 1007 V. 21, p. 1010 V. 20, p. 1394 V. 21, p. 506 V. 21, p. 506 V. 21, p. 506	through 44-4-109 44-5-101 44-5-103 44-5-107 through 44-5-113 44-5-114 44-7-102 44-7-105 44-7-106 44-7-107 44-7-109 44-7-112	Revoked Revoked Revoked Revoked Revoked Revoked Revoked Revoked Revoked Revoked	V. 21, p. 309 V. 21, p. 309	44-13-401a 44-13-402 44-13-403 44-13-405a 44-13-406 44-13-409 44-13-501 44-13-501 44-13-506 through 44-13-601 44-13-601 44-13-601 44-13-701 through 44-13-704	Revoked Amended Amended Amended Amended Amended Amended Amended Amended Amended Amended Amended Amended	V. 21, p. 154 V. 21, p. 154 V. 21, p. 155 V. 21, p. 156 V. 21, p. 157 V. 21, p. 158 V. 21, p. 159
A RE. Reg. No. 30-4-64 30-4-90 30-5-58 30-5-64 30-5-76 30-5-94 30-5-100 30-5-100 30-5-300 30-6-88 30-6-89 30-6-103 30-6-107	AGENCY 30: SOCI HABILITATION Action Amended Revoked Amended	RAL AND SERVICES Register V. 20, p. 490 V. 21, p. 1005 V. 20, p. 1023 V. 20, p. 1393 V. 20, p. 1846 V. 20, p. 1029 V. 20, p. 1030 V. 20, p. 1846 V. 21, p. 1007 V. 20, p. 491 V. 21, p. 1007 V. 21, p. 1010 V. 20, p. 1394 V. 21, p. 506 V. 21, p. 1010 V. 21, p. 1011	through 44-4-109 44-5-101 44-5-103 44-5-107 through 44-5-113 44-5-114 44-7-105 44-7-105 44-7-106 44-7-107 44-7-112 44-7-112 44-7-115 44-7-116 44-8-110	Revoked Revoked Revoked Revoked Revoked Revoked Revoked Revoked Revoked Revoked Revoked Revoked	V. 21, p. 309 V. 21, p. 309	44-13-401a 44-13-402 44-13-403 44-13-405a 44-13-406 44-13-409 44-13-501 44-13-502 44-13-506 through 44-13-601 44-13-601 44-13-601 44-13-701 through 44-13-705	Revoked Amended Amended Amended Amended Amended Amended Amended Amended Amended Amended Amended Amended Amended Amended	V. 21, p. 154 V. 21, p. 154 V. 21, p. 155 V. 21, p. 156 V. 21, p. 157 V. 21, p. 158 V. 21, p. 159
A RE. Reg. No. 30-4-64 30-4-90 30-5-58 30-5-64 30-5-76 30-5-92 30-5-94 30-5-100 30-5-101 30-5-300 30-6-88 30-6-89 30-6-94 30-6-103	AGENCY 30: SOCI HABILITATION Action Amended Newoked New New Amended Amended Amended	RAL AND SERVICES Register V. 20, p. 490 V. 21, p. 1005 V. 20, p. 1023 V. 20, p. 1393 V. 20, p. 1846 V. 20, p. 1029 V. 20, p. 1030 V. 20, p. 1030 V. 20, p. 1846 V. 21, p. 1007 V. 20, p. 491 V. 21, p. 1007 V. 21, p. 1010 V. 20, p. 1394 V. 21, p. 506 V. 21, p. 1011 V. 21, p. 1011 V. 21, p. 1011 V. 21, p. 1011	through 44-4-109 44-5-101 44-5-103 44-5-107 through 44-5-113 44-5-114 44-7-102 44-7-105 44-7-106 44-7-107 44-7-109 44-7-112 44-7-115 44-7-116 44-8-110 through	Revoked Revoked Revoked Revoked Revoked Revoked Revoked Revoked Revoked Revoked Revoked Revoked Revoked Revoked	V. 21, p. 309 V. 21, p. 309	44-13-401a 44-13-402 44-13-403 44-13-405a 44-13-406 44-13-409 44-13-501 44-13-501 44-13-506 through 44-13-601 44-13-601 44-13-601 44-13-701 through 44-13-704	Revoked Amended Amended Amended Amended Amended Amended Amended Amended Amended Amended Amended Amended	V. 21, p. 154 V. 21, p. 154 V. 21, p. 155 V. 21, p. 156 V. 21, p. 157 V. 21, p. 158 V. 21, p. 159 V. 21, p. 161 V. 21, p. 161 V. 21, p. 161
A RE. Reg. No. 30-4-64 30-4-90 30-5-58 30-5-64 30-5-76 30-5-92 30-5-94 30-5-100 30-5-108 30-5-300 30-6-88 30-6-94 30-6-103 30-6-107 30-6-109 30-6-112 30-10-1a	AGENCY 30: SOCI HABILITATION Action Amended	RAL AND SERVICES Register V. 20, p. 490 V. 21, p. 1005 V. 20, p. 1023 V. 20, p. 1393 V. 20, p. 1846 V. 20, p. 1029 V. 20, p. 1030 V. 20, p. 1030 V. 20, p. 1846 V. 21, p. 1007 V. 20, p. 491 V. 21, p. 1007 V. 21, p. 1010 V. 20, p. 1394 V. 21, p. 506 V. 21, p. 1011 V. 21, p. 1013 V. 21, p. 506	through 44-4-109 44-5-101 44-5-103 44-5-107 through 44-5-113 44-5-114 44-7-102 44-7-103 44-7-106 44-7-107 44-7-109 44-7-115 44-7-115 44-7-115 44-7-115 44-7-116 44-8-110 through 44-8-114	Revoked Revoked Revoked Revoked Revoked Revoked Revoked Revoked Revoked Revoked Revoked Revoked Revoked Revoked	V. 21, p. 309 V. 21, p. 309	44-13-401a 44-13-402 44-13-404 44-13-405a 44-13-405 44-13-409 44-13-501 44-13-502a 44-13-506 through 44-13-601 44-13-601 44-13-610 44-13-701 through 44-13-705 44-13-705 44-13-705 44-13-707 44-13-707 44-13-707 44-14-101	Revoked Amended Revoked Amended Amended Amended Revoked Amended Revoked	V. 21, p. 154 V. 21, p. 154 V. 21, p. 155 V. 21, p. 156 V. 21, p. 157 V. 21, p. 158 V. 21, p. 159 V. 21, p. 161 V. 21, p. 161 V. 21, p. 161 V. 21, p. 161 V. 21, p. 83
A RE. Reg. No. 30-4-64 30-4-90 30-5-58 30-5-64 30-5-76 30-5-92 30-5-100 30-5-101 30-5-108 30-6-88 30-6-89 30-6-103 30-6-107 30-6-107 30-6-107 30-6-102 30-10-1a 30-10-2	AGENCY 30: SOCI HABILITATION Action Amended	RAL AND SERVICES Register V. 20, p. 490 V. 21, p. 1005 V. 20, p. 1023 V. 20, p. 1393 V. 20, p. 1846 V. 20, p. 1029 V. 20, p. 1030 V. 20, p. 1846 V. 21, p. 1007 V. 20, p. 491 V. 21, p. 1007 V. 21, p. 1010 V. 20, p. 1394 V. 21, p. 506 V. 21, p. 1011 V. 21, p. 1013 V. 21, p. 506	through 44-4-109 44-5-101 44-5-107 through 44-5-110 44-5-111 44-5-113 44-5-114 44-7-102 44-7-103 44-7-105 44-7-107 44-7-109 44-7-112 44-7-115 44-7-116 44-8-110 through 44-8-114 44-11-111	Revoked Revoked Revoked Revoked Revoked Revoked Revoked Revoked Revoked Revoked Revoked Revoked Revoked Revoked Revoked Revoked	V. 21, p. 309 V. 21, p. 309	44-13-401a 44-13-402 44-13-405a 44-13-405a 44-13-406 44-13-409 44-13-501 44-13-501 44-13-506 through 44-13-601 44-13-601 44-13-701 through 44-13-701 through 44-13-705 44-13-706 44-13-706 44-13-706 44-13-706 44-13-706 44-13-706 44-13-706 44-13-706 44-13-706 44-13-706 44-13-706 44-13-706 44-13-706 44-13-706 44-13-706	Revoked Amended Revoked Revoked Revoked Revoked	V. 21, p. 154 V. 21, p. 154 V. 21, p. 155 V. 21, p. 156 V. 21, p. 157 V. 21, p. 158 V. 21, p. 159 V. 21, p. 161 V. 21, p. 161 V. 21, p. 161 V. 21, p. 83 V. 21, p. 83
A RE. Reg. No. 30-4-64 30-4-90 30-5-58 30-5-64 30-5-76 30-5-94 30-5-100 30-5-101 30-5-300 30-6-88 30-6-94 30-6-107 30-6-107 30-6-107 30-6-107 30-6-112 30-10-1a 30-10-2 30-10-6	AGENCY 30: SOCI HABILITATION Action Amended	RAL AND SERVICES Register V. 20, p. 490 V. 21, p. 1005 V. 20, p. 1023 V. 20, p. 1393 V. 20, p. 1846 V. 20, p. 1030 V. 20, p. 1030 V. 20, p. 1030 V. 20, p. 1046 V. 21, p. 1007 V. 21, p. 1007 V. 21, p. 1010 V. 21, p. 1010 V. 21, p. 1010 V. 21, p. 1010 V. 21, p. 1011 V. 21, p. 1011 V. 21, p. 1011 V. 21, p. 1011 V. 21, p. 1013 V. 21, p. 506 V. 21, p. 506 V. 21, p. 506 V. 21, p. 508	through 44-4-109 44-5-101 44-5-103 44-5-107 through 44-5-113 44-5-114 44-7-105 44-7-105 44-7-106 44-7-107 44-7-112 44-7-112 44-7-115 44-7-116 44-8-110 through 44-8-111 44-11-111	Revoked Revoked Revoked Revoked Revoked Revoked Revoked Revoked Revoked Revoked Revoked Revoked Revoked Revoked Revoked Revoked Revoked	V. 21, p. 309 V. 21, p. 309	44-13-401a 44-13-402 44-13-403 44-13-404 44-13-406 44-13-408 44-13-501 44-13-502a 44-13-506 through 44-13-603 44-13-603 44-13-601 44-13-701 through 44-13-707 44-14-101 44-14-102 44-14-201	Revoked Amended Arevoked Revoked Revoked Revoked Revoked	V. 21, p. 154 V. 21, p. 155 V. 21, p. 156 V. 21, p. 157 V. 21, p. 158 V. 21, p. 159 V. 21, p. 161 V. 21, p. 161 V. 21, p. 83 V. 21, p. 83 V. 21, p. 83
A RE Reg. No. 30-4-64 30-4-90 30-5-58 30-5-64 30-5-76 30-5-92 30-5-91 30-5-101 30-5-108 30-6-89 30-6-89 30-6-103 30-6-107 30-6-112 30-10-1a 30-10-2 30-10-6 30-10-7	AGENCY 30: SOCI HABILITATION Action Amended	RAL AND SERVICES Register V. 20, p. 490 V. 21, p. 1005 V. 20, p. 1023 V. 20, p. 1393 V. 20, p. 1846 V. 20, p. 1029 V. 20, p. 1030 V. 20, p. 1846 V. 21, p. 1007 V. 20, p. 1940 V. 21, p. 1007 V. 21, p. 1010 V. 20, p. 1394 V. 21, p. 1010 V. 21, p. 1010 V. 21, p. 1011 V. 21, p. 1011 V. 21, p. 1011 V. 21, p. 1011 V. 21, p. 506 V. 21, p. 506 V. 21, p. 508 V. 21, p. 508 V. 21, p. 508 V. 21, p. 509	through 44-4-109 44-5-101 44-5-103 44-5-107 through 44-5-113 44-5-114 44-7-102 44-7-105 44-7-106 44-7-107 44-7-109 44-7-112 44-7-115 44-7-116 44-8-110 through 44-8-114 44-11-112 44-11-112	Revoked Revoked Revoked Revoked Revoked Revoked Revoked Revoked Revoked Revoked Revoked Revoked Revoked Revoked Revoked Revoked Amended Amended	V. 21, p. 309 V. 21, p. 335 V. 21, p. 336 V. 21, p. 336	44-13-401a 44-13-402 44-13-404 44-13-405a 44-13-408 44-13-409 44-13-501 44-13-502a 44-13-509 44-13-509 44-13-601 44-13-601 44-13-701 through 44-13-705 44-13-705 44-13-706 44-13-707 44-14-101 44-14-102 44-14-202	Revoked Amended Revoked Revoked Revoked Revoked	V. 21, p. 154 V. 21, p. 154 V. 21, p. 155 V. 21, p. 156 V. 21, p. 157 V. 21, p. 158 V. 21, p. 159 V. 21, p. 161 V. 21, p. 161 V. 21, p. 161 V. 21, p. 83 V. 21, p. 83
Reg. No. 30-4-64 30-4-90 30-5-58 30-5-64 30-5-76 30-5-92 30-5-91 30-5-100 30-5-101 30-5-108 30-5-300 30-6-88 30-6-94 30-6-103 30-6-107 30-6-109 30-6-112 30-10-1a 30-10-2 30-10-7 30-10-7	AGENCY 30: SOCI HABILITATION Action Amended	RAL AND SERVICES Register V. 20, p. 490 V. 21, p. 1005 V. 20, p. 1023 V. 20, p. 1393 V. 20, p. 1393 V. 20, p. 1029 V. 20, p. 1030 V. 20, p. 1030 V. 20, p. 1846 V. 21, p. 1007 V. 20, p. 491 V. 21, p. 1007 V. 21, p. 1010 V. 20, p. 1394 V. 21, p. 506 V. 21, p. 1011 V. 21, p. 506 V. 21, p. 506 V. 21, p. 506 V. 21, p. 506 V. 21, p. 509	through 44-4-109 44-5-101 44-5-103 44-5-107 through 44-5-113 44-5-114 44-7-105 44-7-105 44-7-106 44-7-107 44-7-112 44-7-112 44-7-115 44-7-116 44-8-110 through 44-8-111 44-11-111	Revoked Revoked Revoked Revoked Revoked Revoked Revoked Revoked Revoked Revoked Revoked Revoked Revoked Revoked Revoked Revoked Revoked	V. 21, p. 309 V. 21, p. 309	44-13-401a 44-13-402 44-13-403 44-13-404 44-13-405a 44-13-409 44-13-501 44-13-502a 44-13-506 through 44-13-601 44-13-601 44-13-701 through 44-13-705 44-13-705 44-13-705 44-13-705 44-14-101 44-14-102 44-14-201 44-14-201 44-14-301	Revoked Amended Arevoked Revoked Revoked Revoked Revoked	V. 21, p. 154 V. 21, p. 155 V. 21, p. 156 V. 21, p. 157 V. 21, p. 158 V. 21, p. 159 V. 21, p. 161 V. 21, p. 161 V. 21, p. 83 V. 21, p. 83 V. 21, p. 83
A RE Reg. No. 30-4-64 30-4-90 30-5-58 30-5-64 30-5-76 30-5-92 30-5-91 30-5-101 30-5-108 30-6-89 30-6-89 30-6-103 30-6-107 30-6-112 30-10-1a 30-10-2 30-10-6 30-10-7	AGENCY 30: SOCI HABILITATION Action Amended	RAL AND SERVICES Register V. 20, p. 490 V. 21, p. 1005 V. 20, p. 1023 V. 20, p. 1393 V. 20, p. 1393 V. 20, p. 1029 V. 20, p. 1030 V. 20, p. 1030 V. 20, p. 1846 V. 21, p. 1007 V. 20, p. 491 V. 21, p. 1007 V. 21, p. 1010 V. 20, p. 1394 V. 21, p. 506 V. 21, p. 1011 V. 21, p. 506 V. 21, p. 509 V. 21, p. 509 V. 21, p. 509 V. 21, p. 509 V. 21, p. 1015 V. 21, p. 1015 V. 21, p. 1015 V. 21, p. 1015	through 44-4-109 44-5-101 44-5-103 44-5-107 through 44-5-113 44-5-114 44-7-102 44-7-105 44-7-105 44-7-107 44-7-109 44-7-112 44-7-114 44-7-115 44-7-116 44-8-110 through 44-8-114 44-11-112 44-11-112 44-11-112 44-11-113 44-11-113 44-11-115 44-11-119	Revoked Amended Revoked Amended Revoked Revoked Amended Revoked Amended Revoked Amended	V. 21, p. 309 V. 21, p. 336 V. 21, p. 336	44-13-401a 44-13-402 44-13-403 44-13-404 44-13-406 44-13-409 44-13-501 44-13-506 through 44-13-503 44-13-603 44-13-603 44-13-701 through 44-13-701 through 44-13-705 44-13-705 44-13-707 44-14-101 44-14-102 44-14-201 44-14-301 through 44-13-707	Revoked Amended Revoked Revoked Revoked Revoked Revoked Revoked	V. 21, p. 154 V. 21, p. 154 V. 21, p. 155 V. 21, p. 156 V. 21, p. 157 V. 21, p. 158 V. 21, p. 159 V. 21, p. 159 V. 21, p. 159 V. 21, p. 159 V. 21, p. 161 V. 21, p. 161 V. 21, p. 161 V. 21, p. 83
A RE. Reg. No. 30-4-64 30-4-90 30-5-58 30-5-64 30-5-76 30-5-92 30-5-91 30-5-108 30-5-300 30-6-88 30-6-89 30-6-94 30-6-103 30-6-107 30-6-102 30-10-13 30-10-2 30-10-13 30-10-15 30-10-15 30-10-15 30-10-17	AGENCY 30: SOCI HABILITATION Action Amended	RAL AND SERVICES Register V. 20, p. 490 V. 21, p. 1005 V. 20, p. 1023 V. 20, p. 1393 V. 20, p. 1846 V. 20, p. 1029 V. 20, p. 1030 V. 20, p. 1030 V. 20, p. 1846 V. 21, p. 1007 V. 20, p. 1940 V. 21, p. 1007 V. 21, p. 1007 V. 21, p. 1010 V. 20, p. 1394 V. 21, p. 1010 V. 21, p. 1010 V. 21, p. 1011 V. 21, p. 1011 V. 21, p. 1011 V. 21, p. 1013 V. 21, p. 506 V. 21, p. 506 V. 21, p. 506 V. 21, p. 509 V. 21, p. 509 V. 21, p. 509 V. 21, p. 509 V. 21, p. 1015 V. 21, p. 1017 V. 21, p. 1018 V. 21, p. 1019	through 44-4-109 44-5-101 44-5-103 44-5-107 through 44-5-110 44-5-113 44-5-114 44-7-102 44-7-105 44-7-106 44-7-107 44-7-109 44-7-112 44-7-115 44-7-115 44-11-111 44-11-112 44-11-113 44-11-113 44-11-115 44-11-115 44-11-119	Revoked Amended	V. 21, p. 309 V. 21, p. 336 V. 21, p. 336	44-13-401a 44-13-402 44-13-404 44-13-405a 44-13-408 44-13-409 44-13-501 44-13-502a 44-13-509 44-13-509 44-13-601 44-13-601 44-13-701 through 44-13-705 44-13-705 44-13-706 44-13-707 44-14-101 44-14-202 44-14-301 through 44-13-101 44-14-202 44-14-318 44-15-101	Revoked Amended Revoked Revoked Revoked Revoked Revoked Revoked Revoked	V. 21, p. 154 V. 21, p. 154 V. 21, p. 155 V. 21, p. 155 V. 21, p. 157 V. 21, p. 158 V. 21, p. 159 V. 21, p. 159 V. 21, p. 159 V. 21, p. 159 V. 21, p. 161 V. 21, p. 161 V. 21, p. 83 V. 21, p. 84
Reg. No. 30-4-64 30-4-90 30-5-58 30-5-64 30-5-76 30-5-92 30-5-94 30-5-100 30-5-108 30-5-300 30-6-88 30-6-89 30-6-94 30-6-103 30-6-107 30-6-109 30-6-112 30-10-1a 30-10-2 30-10-15a 30-10-15b 30-10-17	AGENCY 30: SOCI HABILITATION Action Amended	RAL AND SERVICES Register V. 20, p. 490 V. 21, p. 1005 V. 20, p. 1023 V. 20, p. 1393 V. 20, p. 1393 V. 20, p. 1029 V. 20, p. 1030 V. 20, p. 1030 V. 20, p. 1846 V. 21, p. 1007 V. 20, p. 491 V. 21, p. 1007 V. 21, p. 1010 V. 21, p. 1010 V. 21, p. 1010 V. 21, p. 1010 V. 21, p. 1011 V. 21, p. 506 V. 21, p. 506 V. 21, p. 506 V. 21, p. 506 V. 21, p. 509 V. 21, p. 509 V. 21, p. 509 V. 21, p. 1015 V. 21, p. 1015 V. 21, p. 1018 V. 21, p. 1019 V. 21, p. 1020	through 44-4-109 44-5-101 44-5-103 44-5-107 through 44-5-113 44-5-113 44-5-114 44-7-102 44-7-105 44-7-106 44-7-107 44-7-109 44-7-115 44-7-115 44-7-115 44-11-111 44-11-112 44-11-113 44-11-114 44-11-115 44-11-119 44-11-119	Revoked Amended Revoked Amended	V. 21, p. 309 V. 21, p. 336 V. 21, p. 336	44-13-401a 44-13-402 44-13-403 44-13-404 44-13-405a 44-13-409 44-13-501 44-13-502 44-13-502 44-13-506 through 44-13-601 44-13-610 44-13-701 through 44-13-705 44-13-705 44-13-706 44-13-707 44-14-101 44-14-202 44-14-201 44-14-301 through 44-13-18 44-15-101a	Revoked Amended Revoked Revoked Revoked Revoked Revoked Revoked Revoked Amended Amended Revoked Revoked Revoked	V. 21, p. 154 V. 21, p. 154 V. 21, p. 155 V. 21, p. 156 V. 21, p. 157 V. 21, p. 158 V. 21, p. 159 V. 21, p. 161 V. 21, p. 161 V. 21, p. 161 V. 21, p. 161 V. 21, p. 83 V. 21, p. 84 V. 21, p. 84
A RE. Reg. No. 30-4-64 30-4-90 30-5-58 30-5-64 30-5-76 30-5-92 30-5-94 30-5-100 30-5-101 30-5-108 30-6-89 30-6-89 30-6-94 30-6-103 30-6-107 30-6-109 30-6-112 30-10-13 30-10-15 30-10-15 30-10-15b 30-10-17 30-10-18	AGENCY 30: SOCI HABILITATION Action Amended	RAL AND SERVICES Register V. 20, p. 490 V. 21, p. 1005 V. 20, p. 1023 V. 20, p. 1393 V. 20, p. 1393 V. 20, p. 1029 V. 20, p. 1030 V. 20, p. 1029 V. 20, p. 1030 V. 20, p. 1846 V. 21, p. 1007 V. 20, p. 491 V. 21, p. 1007 V. 20, p. 491 V. 21, p. 1010 V. 20, p. 1394 V. 21, p. 1010 V. 20, p. 1394 V. 21, p. 1010 V. 21, p. 1011 V. 21, p. 506 V. 21, p. 506 V. 21, p. 506 V. 21, p. 509 V. 21, p. 509 V. 21, p. 1015 V. 21, p. 1017 V. 21, p. 1018 V. 21, p. 1019 V. 21, p. 1020 V. 21, p. 1020	through 44-4-109 44-5-101 44-5-103 44-5-107 through 44-5-110 44-5-113 44-5-114 44-7-102 44-7-103 44-7-105 44-7-109 44-7-115 44-7-115 44-7-116 44-8-110 through 44-8-111 44-11-111 44-11-112 44-11-115 44-11-115 44-11-112 44-11-112 44-11-112 44-11-112	Revoked Amended Amended Amended Amended Amended Amended Amended Revoked	V. 21, p. 309 V. 21, p. 336 V. 21, p. 337 V. 21, p. 337	44-13-401a 44-13-402 44-13-403 44-13-404 44-13-406 44-13-408 44-13-501 44-13-506 through 44-13-603 44-13-603 44-13-601 44-13-701 through 44-13-705 44-13-101 44-15-101 44-15-101 44-15-101	Revoked Amended Revoked Revoked Revoked Revoked Revoked Revoked Revoked Amended	V. 21, p. 154 V. 21, p. 154 V. 21, p. 155 V. 21, p. 156 V. 21, p. 157 V. 21, p. 158 V. 21, p. 159 V. 21, p. 161 V. 21, p. 83 V. 21, p. 84 V. 21, p. 84 V. 21, p. 85
A RE. Reg. No. 30-4-64 30-4-90 30-5-58 30-5-64 30-5-76 30-5-94 30-5-100 30-5-101 30-5-108 30-6-88 30-6-89 30-6-107 30-6-107 30-6-107 30-6-107 30-10-13 30-10-13 30-10-15 30-10-15 30-10-15 30-10-17 30-10-18 30-10-19 30-10-19 30-10-19 30-10-19	AGENCY 30: SOCI HABILITATION Action Amended	RAL AND SERVICES Register V. 20, p. 490 V. 21, p. 1005 V. 20, p. 1023 V. 20, p. 1393 V. 20, p. 1393 V. 20, p. 1846 V. 20, p. 1030 V. 20, p. 1030 V. 20, p. 1846 V. 21, p. 1007 V. 21, p. 1007 V. 21, p. 1010 V. 21, p. 1010 V. 20, p. 1394 V. 21, p. 506 V. 21, p. 1011 V. 21, p. 1015 V. 21, p. 508 V. 21, p. 508 V. 21, p. 508 V. 21, p. 1015 V. 21, p. 1015 V. 21, p. 1015 V. 21, p. 1017 V. 21, p. 1018 V. 21, p. 1019 V. 21, p. 1019 V. 21, p. 1020 V. 21, p. 1023 V. 21, p. 1023 V. 21, p. 1023 V. 21, p. 1023	through 44-4-109 44-5-101 44-5-103 44-5-107 through 44-5-113 44-5-113 44-5-114 44-7-102 44-7-105 44-7-106 44-7-107 44-7-109 44-7-115 44-7-115 44-7-115 44-11-111 44-11-112 44-11-113 44-11-114 44-11-115 44-11-119 44-11-119	Revoked Amended Revoked Amended	V. 21, p. 309 V. 21, p. 336 V. 21, p. 337 V. 21, p. 337 V. 21, p. 337 V. 21, p. 337	44-13-401a 44-13-402 44-13-403 44-13-404 44-13-405a 44-13-409 44-13-501 44-13-502 44-13-502 44-13-506 through 44-13-601 44-13-610 44-13-701 through 44-13-705 44-13-705 44-13-706 44-13-707 44-14-101 44-14-202 44-14-201 44-14-301 through 44-13-18 44-15-101a	Revoked Amended Revoked Revoked Revoked Revoked Revoked Revoked Revoked Amended Amended Revoked Revoked Revoked	V. 21, p. 154 V. 21, p. 154 V. 21, p. 155 V. 21, p. 155 V. 21, p. 157 V. 21, p. 158 V. 21, p. 159 V. 21, p. 161 V. 21, p. 161 V. 21, p. 161 V. 21, p. 83 V. 21, p. 84 V. 21, p. 84 V. 21, p. 84 V. 21, p. 86 V. 21, p. 86
Reg. No. 30-4-64 30-4-90 30-5-58 30-5-64 30-5-76 30-5-92 30-5-94 30-5-100 30-5-108 30-5-300 30-6-88 30-6-89 30-6-94 30-6-103 30-6-107 30-6-109 30-6-112 30-10-13 30-10-17 30-10-15a 30-10-17 30-10-18 30-10-17 30-10-18 30-10-19 30-10-19 30-10-11	AGENCY 30: SOCI HABILITATION Action Amended	RAL AND SERVICES Register V. 20, p. 490 V. 21, p. 1005 V. 20, p. 1023 V. 20, p. 1393 V. 20, p. 1846 V. 20, p. 1029 V. 20, p. 1030 V. 20, p. 1030 V. 20, p. 1846 V. 21, p. 1007 V. 20, p. 1846 V. 21, p. 1007 V. 21, p. 1010 V. 21, p. 1010 V. 21, p. 1010 V. 21, p. 1010 V. 21, p. 1011 V. 21, p. 506 V. 21, p. 506 V. 21, p. 506 V. 21, p. 509 V. 21, p. 1015 V. 21, p. 1015 V. 21, p. 1017 V. 21, p. 1018 V. 21, p. 1019 V. 21, p. 1019 V. 21, p. 1020 V. 21, p. 1024 V. 21, p. 1024	through 44-4-109 44-5-101 44-5-103 44-5-107 through 44-5-113 44-5-114 44-7-102 44-7-105 44-7-105 44-7-106 44-7-107 44-7-112 44-7-114 44-7-115 44-7-116 44-8-110 through 44-8-110 through 44-8-110 44-11-112 44-11-112 44-11-112 44-11-112 44-11-112 44-11-112 44-11-112 44-11-112 44-11-120 44-11-120 44-11-121	Revoked Amended	V. 21, p. 309 V. 21, p. 336 V. 21, p. 337 V. 21, p. 337	44-13-401a 44-13-402 44-13-403 44-13-404 44-13-405a 44-13-409 44-13-501 44-13-502a 44-13-506 through 44-13-501 44-13-610 44-13-701 through 44-13-705 44-13-705 44-13-706 44-13-707 44-14-101 44-14-201 44-14-201 44-14-201 44-15-101a 44-15-101a 44-15-101a 44-15-101a 44-15-101 44-16-102 44-16-103	Revoked Amended Revoked Revoked Revoked Revoked Revoked Revoked Amended	V. 21, p. 154 V. 21, p. 154 V. 21, p. 155 V. 21, p. 155 V. 21, p. 157 V. 21, p. 158 V. 21, p. 159 V. 21, p. 161 V. 21, p. 161 V. 21, p. 161 V. 21, p. 83 V. 21, p. 83 V. 21, p. 83 V. 21, p. 83 V. 21, p. 84 V. 21, p. 85 V. 21, p. 86 V. 21, p. 86 V. 21, p. 86 V. 21, p. 86
A RE. Reg. No. 30-4-64 30-4-90 30-5-58 30-5-64 30-5-76 30-5-94 30-5-100 30-5-101 30-5-108 30-6-89 30-6-89 30-6-94 30-6-103 30-6-107 30-6-109 30-6-112 30-10-13 30-10-15 30-10-15 30-10-15 30-10-15 30-10-19 30-10-23 30-10-23 30-10-23 30-10-24 30-10-25	AGENCY 30: SOCI HABILITATION Action Amended	RAL AND SERVICES Register V. 20, p. 490 V. 21, p. 1005 V. 20, p. 1023 V. 20, p. 1393 V. 20, p. 1393 V. 20, p. 1846 V. 20, p. 1030 V. 20, p. 1030 V. 20, p. 1846 V. 21, p. 1007 V. 21, p. 1007 V. 21, p. 1010 V. 21, p. 1010 V. 20, p. 1394 V. 21, p. 506 V. 21, p. 1011 V. 21, p. 1015 V. 21, p. 508 V. 21, p. 508 V. 21, p. 508 V. 21, p. 1015 V. 21, p. 1015 V. 21, p. 1015 V. 21, p. 1017 V. 21, p. 1018 V. 21, p. 1019 V. 21, p. 1019 V. 21, p. 1020 V. 21, p. 1023 V. 21, p. 1023 V. 21, p. 1023 V. 21, p. 1023	through 44-4-109 44-5-101 44-5-103 44-5-107 through 44-5-113 44-5-114 44-7-102 44-7-103 44-7-105 44-7-106 44-7-109 44-7-115 44-7-116 44-8-110 44-8-110 44-11-111 44-11-112 44-11-113 44-11-115 44-11-115 44-11-112 44-11-112 44-11-123 44-11-120 44-11-120 44-11-120 44-11-121	Revoked Amended Amended Amended Amended Amended Amended Amended Revoked Amended Amended Amended Amended Amended Revoked Amended	V. 21, p. 309 V. 21, p. 336 V. 21, p. 337	44-13-401a 44-13-402 44-13-403 44-13-404 44-13-406 44-13-408 44-13-409 44-13-501 44-13-506 through 44-13-503 44-13-603 44-13-603 44-13-701 through 44-13-705 44-13-705 44-13-705 44-13-705 44-14-101 44-14-102 44-14-301 through 44-13-705 44-14-301 44-15-101 44-15-101 44-15-101 44-15-101 44-15-101 44-16-102 44-16-103 44-16-103 44-16-103	Revoked Amended Revoked Revoked Revoked Revoked Revoked Revoked Amended Revoked Revoked Revoked Revoked Revoked Revoked Revoked Amended Amended Amended Amended Revoked Revoked	V. 21, p. 154 V. 21, p. 155 V. 21, p. 155 V. 21, p. 156 V. 21, p. 157 V. 21, p. 158 V. 21, p. 159 V. 21, p. 161 V. 21, p. 161 V. 21, p. 161 V. 21, p. 83 V. 21, p. 84 V. 21, p. 86
A RE Reg. No. 30-4-64 30-4-90 30-5-58 30-5-64 30-5-76 30-5-92 30-5-94 30-5-108 30-5-300 30-6-89 30-6-89 30-6-94 30-6-103 30-6-107 30-6-102 30-10-13 30-10-15 30-10-15 30-10-17 30-10-15 30-10-17 30-10-18 30-10-21 30-10-21 30-10-23 30-10-24 30-10-25 30-10-27	AGENCY 30: SOCI HABILITATION Action Amended	RAL AND SERVICES Register V. 20, p. 490 V. 21, p. 1005 V. 20, p. 1023 V. 20, p. 1393 V. 20, p. 1846 V. 20, p. 1030 V. 20, p. 1846 V. 20, p. 1030 V. 20, p. 1846 V. 21, p. 1007 V. 21, p. 1007 V. 21, p. 1010 V. 20, p. 491 V. 21, p. 1010 V. 21, p. 1010 V. 21, p. 1011 V. 21, p. 1015 V. 21, p. 508 V. 21, p. 508 V. 21, p. 508 V. 21, p. 1015 V. 21, p. 1015 V. 21, p. 1015 V. 21, p. 1015 V. 21, p. 1019 V. 21, p. 1020 V. 21, p. 1023 V. 21, p. 1024 V. 21, p. 1025 V. 21, p. 1026	through 44-4-109 44-5-101 44-5-103 44-5-107 through 44-5-113 44-5-114 44-7-102 44-7-105 44-7-105 44-7-106 44-7-107 44-7-112 44-7-114 44-7-115 44-7-116 44-8-110 through 44-8-110 through 44-8-110 through 44-11-112 44-11-112 44-11-112 44-11-120 44-11-120 44-11-120 44-11-120 44-11-123 44-11-123 44-11-127 44-11-129 44-11-130	Revoked Amended	V. 21, p. 309 V. 21, p. 336 V. 21, p. 337 V. 21, p. 338 V. 21, p. 338 V. 21, p. 338	44-13-401a 44-13-402 44-13-403 44-13-404 44-13-405a 44-13-409 44-13-501 44-13-502a 44-13-506 through 44-13-601 44-13-603 44-13-601 44-13-701 through 44-13-705 44-13-705 44-13-706 44-13-706 44-13-706 44-13-701 44-14-101 44-14-102 44-14-101 44-15-101a 44-15-101a 44-15-101a 44-15-101a 44-15-101a 44-15-101a 44-15-102 44-16-103 44-16-103 44-16-103	Revoked Amended Revoked Revoked Revoked Revoked Amended Revoked	V. 21, p. 154 V. 21, p. 154 V. 21, p. 155 V. 21, p. 155 V. 21, p. 157 V. 21, p. 158 V. 21, p. 159 V. 21, p. 159 V. 21, p. 159 V. 21, p. 161 V. 21, p. 161 V. 21, p. 161 V. 21, p. 83 V. 21, p. 84 V. 21, p. 84 V. 21, p. 86
Reg. No. 30-4-64 30-4-90 30-5-58 30-5-64 30-5-76 30-5-92 30-5-94 30-5-100 30-5-101 30-5-108 30-5-300 30-6-88 30-6-89 30-6-94 30-6-103 30-6-107 30-6-109 30-6-112 30-10-13 30-10-17 30-10-15a 30-10-15b 30-10-17 30-10-18 30-10-17 30-10-18 30-10-23 30-10-23 30-10-23 30-10-23 30-10-24 30-10-25 30-10-27 30-10-27	AGENCY 30: SOCI HABILITATION Action Amended	RAL AND SERVICES Register V. 20, p. 490 V. 21, p. 1005 V. 20, p. 1023 V. 20, p. 1393 V. 20, p. 1393 V. 20, p. 1029 V. 20, p. 1030 V. 20, p. 1030 V. 20, p. 1846 V. 21, p. 1007 V. 20, p. 491 V. 21, p. 1007 V. 20, p. 491 V. 21, p. 1010 V. 20, p. 1394 V. 21, p. 1010 V. 20, p. 1394 V. 21, p. 1011 V. 21, p. 506 V. 21, p. 506 V. 21, p. 506 V. 21, p. 1017 V. 21, p. 509 V. 21, p. 509 V. 21, p. 1015 V. 21, p. 1015 V. 21, p. 1017 V. 21, p. 1019 V. 21, p. 1019 V. 21, p. 1019 V. 21, p. 1020 V. 21, p. 1020 V. 21, p. 1024 V. 21, p. 1025	through 44-4-109 44-5-101 44-5-103 44-5-107 through 44-5-110 44-5-113 44-5-114 44-7-102 44-7-105 44-7-106 44-7-106 44-7-107 44-7-112 44-7-112 44-7-115 44-7-115 44-11-111 44-11-112 44-11-113 44-11-112 44-11-120 44-11-121	Revoked Amended Amended Amended Amended Amended Revoked Amended	V. 21, p. 309 V. 21, p. 336 V. 21, p. 337 V. 21, p. 338	44-13-401a 44-13-402 44-13-403 44-13-404 44-13-405a 44-13-408 44-13-409 44-13-501 44-13-502a 44-13-509 44-13-509 44-13-610 44-13-701 44-13-701 44-13-705 44-13-707 44-14-101 44-14-202 44-14-301 44-14-301 44-14-318 44-15-101 44-15-101a 44-15-101a 44-16-103 44-16-103 44-16-103 44-16-105 44-16-106	Revoked Amended Revoked Revoked Revoked Revoked Revoked Revoked Amended Revoked	V. 21, p. 154 V. 21, p. 154 V. 21, p. 155 V. 21, p. 155 V. 21, p. 157 V. 21, p. 158 V. 21, p. 159 V. 21, p. 159 V. 21, p. 159 V. 21, p. 161 V. 21, p. 161 V. 21, p. 161 V. 21, p. 83 V. 21, p. 84 V. 21, p. 86
A RE. Reg. No. 30-4-64 30-4-90 30-5-58 30-5-64 30-5-76 30-5-92 30-5-94 30-5-100 30-5-108 30-5-108 30-6-88 30-6-89 30-6-94 30-6-103 30-6-107 30-6-109 30-6-112 30-10-1a 30-10-2 30-10-13 30-10-15a 30-10-15b 30-10-17 30-10-18 30-10-19 30-10-23 30-10-24 30-10-23 30-10-24 30-10-25 30-10-27 30-10-29 30-10-29 30-10-29	AGENCY 30: SOCI HABILITATION Action Amended	RAL AND SERVICES Register V. 20, p. 490 V. 21, p. 1005 V. 20, p. 1023 V. 20, p. 1393 V. 20, p. 1846 V. 20, p. 1030 V. 20, p. 1846 V. 20, p. 1030 V. 20, p. 1846 V. 21, p. 1007 V. 21, p. 1007 V. 21, p. 1010 V. 20, p. 491 V. 21, p. 1010 V. 21, p. 1010 V. 21, p. 1011 V. 21, p. 1015 V. 21, p. 508 V. 21, p. 508 V. 21, p. 508 V. 21, p. 1015 V. 21, p. 1015 V. 21, p. 1015 V. 21, p. 1015 V. 21, p. 1019 V. 21, p. 1020 V. 21, p. 1023 V. 21, p. 1024 V. 21, p. 1025 V. 21, p. 1026	through 44-4-109 44-5-101 44-5-103 44-5-107 through 44-5-113 44-5-113 44-5-114 44-7-102 44-7-105 44-7-106 44-7-107 44-7-109 44-7-112 44-7-115 44-7-116 44-8-110 through 44-8-114 44-11-111 44-11-112 44-11-113 44-11-112 44-11-122 44-11-122 44-11-123 44-11-123 44-11-123 44-11-127 44-11-130 44-11-130 44-11-131	Revoked Amended	V. 21, p. 309 V. 21, p. 336 V. 21, p. 337 V. 21, p. 338 V. 21, p. 338 V. 21, p. 338 V. 21, p. 339 V. 21, p. 339	44-13-401a 44-13-402 44-13-403 44-13-404 44-13-405a 44-13-409 44-13-501 44-13-502a 44-13-506 through 44-13-601 44-13-603 44-13-601 44-13-701 through 44-13-705 44-13-705 44-13-706 44-13-706 44-13-706 44-13-701 44-14-101 44-14-102 44-14-101 44-15-101a 44-15-101a 44-15-101a 44-15-101a 44-15-101a 44-15-101a 44-15-102 44-16-103 44-16-103 44-16-103	Revoked Amended Revoked Revoked Revoked Revoked Amended Revoked	V. 21, p. 154 V. 21, p. 154 V. 21, p. 155 V. 21, p. 155 V. 21, p. 157 V. 21, p. 158 V. 21, p. 159 V. 21, p. 159 V. 21, p. 159 V. 21, p. 161 V. 21, p. 161 V. 21, p. 161 V. 21, p. 83 V. 21, p. 84 V. 21, p. 84 V. 21, p. 86
Reg. No. 30-4-64 30-4-90 30-5-58 30-5-64 30-5-76 30-5-92 30-5-94 30-5-100 30-5-101 30-5-108 30-5-300 30-6-88 30-6-89 30-6-94 30-6-103 30-6-107 30-6-109 30-6-112 30-10-13 30-10-15a 30-10-15b 30-10-17 30-10-15b 30-10-17 30-10-15b 30-10-17 30-10-123 30-10-23a 30-10-24 30-10-25 30-10-27 30-10-27 30-10-29 30-112-16 through	AGENCY 30: SOCI HABILITATION Action Amended	RAL AND SERVICES Register V. 20, p. 490 V. 21, p. 1005 V. 20, p. 1023 V. 20, p. 1393 V. 20, p. 1393 V. 20, p. 1030 V. 20, p. 1029 V. 20, p. 1030 V. 20, p. 1846 V. 21, p. 1007 V. 20, p. 491 V. 21, p. 1007 V. 20, p. 1949 V. 21, p. 1010 V. 20, p. 1394 V. 21, p. 1010 V. 20, p. 1394 V. 21, p. 1010 V. 21, p. 1011 V. 21, p. 506 V. 21, p. 506 V. 21, p. 1011 V. 21, p. 1015 V. 21, p. 509 V. 21, p. 1015 V. 21, p. 1015 V. 21, p. 1017 V. 21, p. 1018 V. 21, p. 1019 V. 21, p. 1019 V. 21, p. 1020 V. 21, p. 1020 V. 21, p. 1020 V. 21, p. 1024 V. 21, p. 1025 V. 21, p. 1025 V. 21, p. 1026 V. 21, p. 1027 V. 21, p. 1028	through 44-4-109 44-5-101 44-5-103 44-5-107 through 44-5-113 44-5-113 44-5-114 44-7-105 44-7-105 44-7-106 44-7-107 44-7-112 44-7-112 44-7-114 44-7-115 44-11-112 44-11-112 44-11-112 44-11-122 44-11-123 44-11-123 44-11-123 44-11-129 44-11-130 44-11-131	Revoked Amended	V. 21, p. 309 V. 21, p. 336 V. 21, p. 337 V. 21, p. 338 V. 21, p. 338 V. 21, p. 338 V. 21, p. 338 V. 21, p. 339	44-13-401a 44-13-402 44-13-403 44-13-404 44-13-406 44-13-408 44-13-501 44-13-502a 44-13-506 through 44-13-503 44-13-601 44-13-701 through 44-13-705 44-13-705 44-13-707 44-14-101 44-14-102 44-14-301 through 44-13-707 44-14-101 44-14-102 44-14-301 44-15-101 44-15-101 44-15-101 44-15-101 44-16-102 44-16-103 44-16-105 44-16-105 44-16-106 44-16-108	Revoked Amended Revoked Revoked Revoked Revoked Amended Revoked	V. 21, p. 154 V. 21, p. 155 V. 21, p. 156 V. 21, p. 157 V. 21, p. 158 V. 21, p. 159 V. 21, p. 161 V. 21, p. 161 V. 21, p. 83 V. 21, p. 83 V. 21, p. 83 V. 21, p. 83 V. 21, p. 84 V. 21, p. 84 V. 21, p. 86
A RE. Reg. No. 30-4-64 30-4-90 30-5-58 30-5-64 30-5-76 30-5-92 30-5-94 30-5-100 30-5-108 30-5-108 30-6-88 30-6-89 30-6-94 30-6-103 30-6-107 30-6-109 30-6-112 30-10-1a 30-10-2 30-10-13 30-10-15a 30-10-15b 30-10-17 30-10-18 30-10-19 30-10-23 30-10-24 30-10-23 30-10-24 30-10-25 30-10-27 30-10-29 30-10-29 30-10-29	AGENCY 30: SOCI HABILITATION Action Amended	RAL AND SERVICES Register V. 20, p. 490 V. 21, p. 1005 V. 20, p. 1023 V. 20, p. 1393 V. 20, p. 1846 V. 20, p. 1030 V. 20, p. 1846 V. 20, p. 1030 V. 20, p. 1846 V. 21, p. 1007 V. 21, p. 1007 V. 21, p. 1010 V. 20, p. 491 V. 21, p. 1010 V. 21, p. 1010 V. 21, p. 1011 V. 21, p. 1015 V. 21, p. 508 V. 21, p. 508 V. 21, p. 508 V. 21, p. 1015 V. 21, p. 1015 V. 21, p. 1015 V. 21, p. 1015 V. 21, p. 1019 V. 21, p. 1020 V. 21, p. 1023 V. 21, p. 1024 V. 21, p. 1025 V. 21, p. 1026	through 44-4-109 44-5-101 44-5-103 44-5-107 through 44-5-113 44-5-113 44-5-114 44-7-102 44-7-105 44-7-106 44-7-107 44-7-109 44-7-112 44-7-115 44-7-116 44-8-110 through 44-8-114 44-11-111 44-11-112 44-11-113 44-11-112 44-11-122 44-11-122 44-11-123 44-11-123 44-11-123 44-11-127 44-11-130 44-11-130 44-11-131	Revoked Amended	V. 21, p. 309 V. 21, p. 336 V. 21, p. 337 V. 21, p. 338 V. 21, p. 338 V. 21, p. 338 V. 21, p. 339 V. 21, p. 339	44-13-401a 44-13-402 44-13-403 44-13-404 44-13-406 44-13-408 44-13-409 44-13-501 44-13-502a 44-13-506 through 44-13-601 44-13-603 44-13-601 44-13-701 through 44-13-704 44-13-705 44-13-706 44-13-706 44-13-706 44-13-706 44-13-707 44-14-101 44-14-102 44-14-102 44-14-101 44-15-101a 44-15-101a 44-15-101a 44-15-101a 44-15-101a 44-16-105 44-16-105 44-16-106 44-16-107 44-16-108 AGENC	Revoked Amended Revoked Revoked Revoked Revoked Revoked Amended Revoked	V. 21, p. 154 V. 21, p. 155 V. 21, p. 156 V. 21, p. 157 V. 21, p. 157 V. 21, p. 158 V. 21, p. 159 V. 21, p. 159 V. 21, p. 159 V. 21, p. 159 V. 21, p. 161 V. 21, p. 161 V. 21, p. 161 V. 21, p. 83 V. 21, p. 84 V. 21, p. 86
Reg. No. 30-4-64 30-4-90 30-5-58 30-5-64 30-5-76 30-5-92 30-5-94 30-5-108 30-5-108 30-5-108 30-6-88 30-6-89 30-6-94 30-6-103 30-6-107 30-6-109 30-6-112 30-10-1a 30-10-2 30-10-13 30-10-15a 30-10-15a 30-10-15b 30-10-17 30-10-18 30-10-23 30-10-23 30-10-23 30-10-23 30-10-23 30-10-24 30-10-23 30-10-25 30-10-27 30-10-29 30-12-16 through 30-12-22 30-13-17 through	AGENCY 30: SOCI HABILITATION Action Amended Am	RAL AND SERVICES Register V. 20, p. 490 V. 21, p. 1005 V. 20, p. 1023 V. 20, p. 1393 V. 20, p. 1393 V. 20, p. 1393 V. 20, p. 1030 V. 20, p. 1030 V. 20, p. 1030 V. 20, p. 1846 V. 21, p. 1007 V. 20, p. 491 V. 21, p. 1007 V. 21, p. 1010 V. 20, p. 1394 V. 21, p. 506 V. 21, p. 1010 V. 21, p. 1011 V. 21, p. 1015 V. 21, p. 506 V. 21, p. 506 V. 21, p. 508 V. 21, p. 1015 V. 21, p. 1015 V. 21, p. 1015 V. 21, p. 1015 V. 21, p. 1017 V. 21, p. 1018 V. 21, p. 1019 V. 21, p. 1019 V. 21, p. 1020 V. 21, p. 1020 V. 21, p. 1024 V. 21, p. 1024 V. 21, p. 1025 V. 21, p. 1026 V. 21, p. 1028	through 44-4-109 44-5-101 44-5-103 44-5-107 through 44-5-110 44-5-113 44-5-114 44-7-102 44-7-105 44-7-106 44-7-107 44-7-106 44-7-107 44-7-112 44-7-115 44-7-115 44-7-115 44-11-111 44-11-112 44-11-113 44-11-112 44-11-122 44-11-121 44-11-122 44-11-123 44-11-123 44-11-123 44-11-133 44-11-130	Revoked Amended	V. 21, p. 309 V. 21, p. 336 V. 21, p. 337 V. 21, p. 338 V. 21, p. 339 V. 21, p. 117 V. 21, p. 117	44-13-401a 44-13-402 44-13-403 44-13-404 44-13-405a 44-13-406 44-13-409 44-13-501 44-13-502a 44-13-506 through 44-13-509 44-13-610 44-13-701 through 44-13-701 through 44-13-705 44-13-707 44-14-101 44-14-202 44-14-301 through 44-13-705 44-13-705 44-13-707 44-14-101 44-14-102 44-14-201 44-14-202 44-14-301 through 44-13-101 44-15-102 44-15-102 44-16-103 44-16-103 44-16-106 44-16-107 44-16-108 AGENC' RESOURC RESOURC RESOURC	Revoked Amended Revoked Revoked Revoked Revoked Revoked Amended Revoked	V. 21, p. 154 V. 21, p. 154 V. 21, p. 155 V. 21, p. 155 V. 21, p. 157 V. 21, p. 158 V. 21, p. 159 V. 21, p. 159 V. 21, p. 159 V. 21, p. 161 V. 21, p. 161 V. 21, p. 161 V. 21, p. 83 V. 21, p. 84 V. 21, p. 84 V. 21, p. 86
Reg. No. 30-4-64 30-4-90 30-5-58 30-5-64 30-5-76 30-5-92 30-5-94 30-5-100 30-5-101 30-5-108 30-5-300 30-6-88 30-6-89 30-6-94 30-6-103 30-6-107 30-6-109 30-6-112 30-10-13 30-10-15a 30-10-15a 30-10-17 30-10-18 30-10-17 30-10-18 30-10-23a 30-10-24 30-10-23a 30-10-24 30-10-27 30-10-29 30-10-29 30-12-16 through 30-12-22 30-13-17	AGENCY 30: SOCI HABILITATION Action Amended	RAL AND SERVICES Register V. 20, p. 490 V. 21, p. 1005 V. 20, p. 1023 V. 20, p. 1393 V. 20, p. 1393 V. 20, p. 1030 V. 20, p. 1029 V. 20, p. 1030 V. 20, p. 1846 V. 21, p. 1007 V. 20, p. 491 V. 21, p. 1007 V. 20, p. 1949 V. 21, p. 1010 V. 20, p. 1394 V. 21, p. 1010 V. 20, p. 1394 V. 21, p. 1010 V. 21, p. 1011 V. 21, p. 506 V. 21, p. 506 V. 21, p. 1011 V. 21, p. 1015 V. 21, p. 509 V. 21, p. 1015 V. 21, p. 1015 V. 21, p. 1017 V. 21, p. 1018 V. 21, p. 1019 V. 21, p. 1019 V. 21, p. 1020 V. 21, p. 1020 V. 21, p. 1020 V. 21, p. 1024 V. 21, p. 1025 V. 21, p. 1025 V. 21, p. 1026 V. 21, p. 1027 V. 21, p. 1028	through 44-4-109 44-5-101 44-5-103 44-5-107 through 44-5-110 44-5-113 44-5-114 44-7-102 44-7-105 44-7-106 44-7-106 44-7-107 44-7-112 44-7-112 44-7-115 44-7-115 44-11-112 44-11-113 44-11-112 44-11-120 44-11-121 44-11-120 44-11-121 44-11-120 44-11-121 44-11-120 44-11-121 44-11-120 44-11-121 44-11-120 44-11-121 44-11-120 44-11-121 44-11-120 44-11-121 44-11-123 44-11-123 44-11-132 44-11-130 44-11-131 44-11-131 44-11-131	Revoked Amended	V. 21, p. 309 V. 21, p. 336 V. 21, p. 337 V. 21, p. 338 V. 21, p. 338 V. 21, p. 338 V. 21, p. 339 V. 21, p. 319	44-13-401a 44-13-402 44-13-403 44-13-404 44-13-405a 44-13-409 44-13-501 44-13-502a 44-13-506 through 44-13-601 44-13-603 44-13-601 44-13-701 through 44-13-705 44-13-706 44-13-706 44-13-701 44-14-101 44-14-102 44-14-201 44-14-101 44-15-101 44-15-101 44-15-101 44-15-101 44-15-101 44-15-101 44-16-105 44-16-106 44-16-106 44-16-106 44-16-107 44-16-108 AGENCY RESOURC	Revoked Amended Revoked Revoked Revoked Revoked Revoked Amended Revoked	V. 21, p. 154 V. 21, p. 154 V. 21, p. 155 V. 21, p. 155 V. 21, p. 157 V. 21, p. 158 V. 21, p. 159 V. 21, p. 159 V. 21, p. 159 V. 21, p. 161 V. 21, p. 161 V. 21, p. 161 V. 21, p. 83 V. 21, p. 83 V. 21, p. 83 V. 21, p. 83 V. 21, p. 84 V. 21, p. 84 V. 21, p. 86

50-1-4	Amended	V. 20, p. 138	68-1-3a	Amended	V. 21, p. 746	AG	GENCY 91: DEP	ARTMENT OF
50-2-1	Amended	V. 20, p. 139	68-2-5	Amended	V. 21, p. 308		EDUCAT	
50-2-3 50-2-9	Amended Revoked	V. 20, p. 139 V. 20, p. 140	68-9-1 68-9-2	Amended New	V. 21, p. 308 V. 20, p. 1020	Reg. No.	Action	Register
50-2-12	Amended	V. 20, p. 140 V. 20, p. 140		Y 74: BOARD OF A		91-1-70a	Amended	V. 20, p. 1894
50-2-17	Amended	V. 20, p. 140	Reg. No.	Action	Register	91-1-146a		
50-2-18	Amended	V. 20, p. 140	74-4-3a	Amended	V. 20, p. 1650	through 91-1-146e	Revoked	V. 21, p. 178
50-2-19	Amended	V. 20, p. 140	74-4-3a 74-4-4	Amended	V. 20, p. 1650 V. 20, p. 1650	91-1-206	Amended	V. 21, p. 178
50-2-21 50-2-26	Amended	V. 20, p. 141	74-4-8	Amended	V. 20, p. 1650	91-1-215		· · ==/ [· · · ·
50-2-26	Amended	V. 20, p. 143	74-5-2	Amended	V. 20, p. 1651	through		
through			74-5-202	Amended	V. 20, p. 1652	91-1-219	New	V. 21, p. 178-180
50-3-5	Amended	V. 20, p. 143-145	74-5-205	Amended	V. 20, p. 1652	91-5-14 91-37-2	Amended Amended	V. 20, p. 108 V. 20, p. 724
50-4-2	Amended	V. 20, p. 146	74-5-302 74-5-404a	Amended Amended	V. 20, p. 1652 V. 20, p. 1652	91-37-3	Amended	V. 20, p. 724 V. 20, p. 724
	GENCY 51: DEPA		74-7-3	New	V. 20, p. 1652 V. 20, p. 1652	91-37-4	Amended	V. 20, p. 724
	AN RESOURCES ORKERS COM	S—DIVISION OF	74-11-6	Amended	V. 20, p. 1653	91-40-2	Amended	V. 20, p. 541
			74-11-7	Amended	V. 20, p. 1653	91-40-7	Amended	V. 20, p. 541
Reg. No.	Action	Register	74-11-8			91-40-9 91-40-10	Amended	V. 20, p. 542
51-2-6 51-3-1	New	V. 21, p. 864	through 74-11-14	Revoked	V. 20, p. 1653	91-40-17	Amended Amended	V. 20, p. 542 V. 20, p. 543
through			74-11-14	New	V. 20, p. 1653 V. 20, p. 1653	91-40-18	Amended	V. 20, p. 544
51-3-4	Amended	V. 21, p. 864-865	74-12-1	Amended	V. 20, p. 1654	91-40-27	Amended	V. 20, p. 544
51-9-7	Amended	V. 20, p. 1755	AGENCY 7	5: STATE BANKI	NG DEPARTMENT	91-40-33	Amended	V. 20, p. 544
51-9-12			Reg. No.	Action	Register	91-40-36	Amended	V. 20, p. 545
through	D 1 4	V 21 - 0/F	75-6-32	New	V. 20, p. 175	91-40-37 91-40-38	Amended Amended	V. 20, p. 545 V. 20, p. 545
51-9-14 51-10-6	Revoked Revoked	V. 21, p. 865 V. 21, p. 865		80: KANSAS PUE	*	91-40-52	Amended	V. 20, p. 545 V. 20, p. 545
51-17-1	Revoked	V. 21, p. 865		RETIREMENT S		91-40-53	Amended	V. 20, p. 546
51-24-1	Amended	V. 21, p. 865	Reg. No.	Action	Register	91-41-1		**
51-24-3	Amended	V. 21, p. 865	80-5-19			through		
51-24-4	Amended	V. 21, p. 866	through			91-41-4	New	V. 20, p. 546, 547
AGE	ENCY 60: BOARI	O OF NURSING	80-5-22	New	V. 20, p. 1649, 1650			IENT OF REVENUE
Reg. No.	Action	Register	80-9-1	New	Ŷ. 20, р. 1650	Reg. No.	Action	Register
60-2-101	Amended	V. 21, p. 840	80-9-2	New	V. 20, p. 1650	92-1-1	Revoked	V. 21, p. 332
60-3-106	Amended	V. 21, p. 840		GENCY 81: OFFIC		92-1-2	Revoked	V. 21, p. 332
60-3-111	Amended	V. 20, p. 1522		CURITIES COMM		92-1-3 92-5-4	Revoked Revoked	V. 21, p. 332 V. 21, p. 312
60-4-101 60-4-103	Amended Amended	V. 20, p. 449 V. 21, p. 841	Reg. No.	Action	Register	92-5-5	Revoked	v. 21, p. 312
60-7-102	Amended	V. 20, p. 449	81-3-1	Amended	V. 20, p. 1604	through		
60-7-108	Amended	V. 20, p. 449	81-3-2	Amended	V. 20, p. 1606	92-5-10	Amended	V. 21, p. 312, 313
60-8-101	Amended	V. 20, p. 449	81-3-3 81-3-5	Revoked New	V. 20, p. 1606 V. 20, p. 1606	92-5-11	Revoked	V. 21, p. 313
60-9-105	Amended	V. 20, p. 449	81-4-3	Revoked	V. 20, p. 1607	92-5-12	Amended	V. 21, p. 313
60-9-106 60-11-116	Amended Amended	V. 20, p. 450	81-5-7	Amended	V. 20, p. 1607	92-5-13 92-8-20	Amended Revoked	V. 21, p. 313 V. 21, p. 332
60-11-119	Amended	V. 21, p. 316 V. 20, p. 451	81-14-1			92-9-1	Amended	V. 21, p. 332 V. 21, p. 332
60-12-106	Amended	V. 20, p. 1522	through		** **	92-9-3	Amended	V. 21, p. 332
60-13-101	Amended	V. 20, p. 451	81-14-8	New	V. 20, p. 1607-1617	92-9-4	Amended	V. 21, p. 332
60-13-103	Amended	V. 21, p. 316	AGEN	NCY 82: STATE CO		92-9-5	Amended	V. 21, p. 332
60-13-110	Amended	V. 21, p. 317		COMMISSIO		92-9-7 92-9-8	Revoked	V. 21, p. 332
60-13-112 60-16-101	Amended	V. 20, p. 1523	Reg. No.	Action	Register	92-9-8	Revoked	V. 20, p. 1124
60-16-101	Amended Amended	V. 21, p. 841 V. 21, p. 842	82-1-250	New	V. 20, p. 1094	through		
60-16-104	Amended	V. 21, p. 842 V. 21, p. 842	82-3-111	Amended	V. 21, p. 43	92-11-16	Revoked	V. 21, p. 332, 333
		OF EXAMINERS	82-3-120 82-3-120a	Amended Revoked	V. 21, p. 44 V. 21, p. 45	92-12-4	Amended	V. 21, p. 586
	IN OPTOM		82-3-123	Amended	V. 21, p. 45 V. 21, p. 45	92-12-11	Amended	V. 21, p. 586
Reg. No.	Action	Register	82-3-133	Amended	V. 20, p. 771	92-12-29	Revoked Amended	V. 21, p. 586
65-4-3	Amended	V. 21, p. 183	82-3-133a	New	V. 20, p. 771	92-12-47 92-12-56	Revoked	V. 21, p. 586 V. 21, p. 587
65-8-5	New	V. 20, p. 944	82-3-201	Amended	V. 20, p. 771	92-12-58	Amended	V. 21, p. 587
AGENCY	63: BOARD OF	MORTUARY ARTS	82-3-206	Amended	V. 20, p. 771	92-12-66	Revoked	V. 20, p. 1124
Reg. No.	Action	Register	82-3-300 82-3-304	Amended Amended	V. 20, p. 772 V. 21, p. 45	92-12-66a	New	V. 20, p. 1124
63-1-23	New	V. 21, p. 659	82-3-306	Amended	V. 20, p. 772	92-12-67	Amended	V. 21, p. 587
63-3-22	New	V. 21, p. 659	82-3-307	Amended	V. 20, p. 773	92-12-68 92-12-105	Revoked Amended	V. 21, p. 587 V. 21, p. 587
63-3-23	New	V. 21, p. 659	82-3-310	Amended	V. 20, p. 773	92-12-106	Amended	V. 21, p. 587
63-4-1	Amended	V. 21, p. 659	82-3-312	Amended	V. 21, p. 117	92-12a-1		· · ==/ F · · · ·
63-7-1			82-3-400	Amended	V. 21, p. 383	through		
through 63-7-8	New	V. 21, p. 660-662	82-3-401 82-3-401a	Amended Poveked	V. 21, p. 383	92-12a-23	Revoked	V. 21, p. 333, 334
		OF TECHNICAL	82-3-401a 82-3-401b	Revoked Revoked	V. 21, p. 384 V. 21, p. 384	92-14-4		
AGL	PROFESS		82-3-402	neveneu		through 92-14-9	Amended	V. 21, p. 334, 335
Reg. No.	Action	Register	through			92-15-3	Amended	V. 21, p. 335 V. 21, p. 335
66-6-1	Amended	V. 20, p. 1647	82-3-410	Amended	V. 21, p. 384-389	92-15-4	Amended	V. 21, p. 335
66-6-4	Amended	V. 20, p. 1647 V. 20, p. 1647	82-3-411	New	V. 21, p. 389	92-15-6	Amended	V. 20, p. 1126
66-10-1	Amended	V. 20, p. 103	82-3-412 82-4-3	New Amended (T)	V. 21, p. 390 V. 20, p. 1723	92-15-8	Amended	V. 21, p. 335
66-10-4	Amended	V. 20, p. 103	82-4-3	Amended (1)	V. 20, p. 1723 V. 20, p. 1868	92-17-1		
66-10-11	Amended	V. 20, p. 104	82-4-26a	New (T)	V. 20, p. 1723	through 92-17-6	Amended	V. 21, p. 313, 314
66-10-12	Amended	V. 20, p. 1648	82-4-26a	New	V. 20, p. 1869	92-19-4a	Revoked	V. 20, p. 1126
66-10-13 66-14-5	Amended	V. 20, p. 1648 V. 20 pp. 1649		AGENCY 86: REAL	ESTATE	92-19-4b	New	V. 20, p. 1126
66-14-5 66-14-10	Amended Amended	V. 20 pp. 1649 V. 20, p. 104		COMMISSIO	ON	92-19-16a	New	V. 20, p. 1128
		OF PHARMACY	Reg. No.	Action	Register	92-19-24	Amended	V. 20, p. 1129
			86-1-10	Amended	V. 20, p. 1825	92-19-33	Amended	V. 20, p. 1129
Reg. No.	Action	Register		NCY 88: BOARD	*	92-19-64 92-19-64a	Revoked New	V. 20, p. 1129 V. 20, p. 1129
68-1-1a 68-1-1e	Amended Revoked	V. 21, p. 746 V. 21, p. 308	Reg. No.	Action	Register	92-19-04a	Amended	V. 20, p. 1129 V. 20, p. 1130
68-1-2a	Amended	V. 21, p. 300 V. 21, p. 746	88-16-1a	Revoked (T)	V. 21, p. 501	92-19-75	Revoked	V. 20, p. 1130
68-1-3	Revoked	V. 21, p. 308	88-16-1b	New (T)	V. 21, p. 501			(continued)
		-			-			

92-22-4	Amended	V. 21, p. 450	99-30-2			111-2-120	Amended	V. 20, p. 1094
92-22-19	Revoked	V. 21, p. 450	through			111-2-124	Amended	V. 21, p. 590
92-22-22	Revoked	V. 21, p. 450	99-30-6	Amended	V. 21, p. 15, 16	111-2-125	New	V. 20, p. 573
92-22-23	Amended	V. 21, p. 450	99-31-2		•	111-2-126	New	V. 20, p. 573
92-22-24	Revoked	V. 21, p. 450	through			111-2-127	Amended	V. 20, p. 937
92-22-25	Amended	V. 21, p. 450	99-31-6	Amended	V. 21, p. 16	111-2-128	New	V. 20, p. 1188
92-22-33	New	V. 21, p. 450	99-40-1	Revoked	V. 21, p. 16 V. 21, p. 16	111-2-129	New	V. 20, p. 1343
92-22-34	New	V. 21, p. 450 V. 21, p. 450	99-40-3	Amended	V. 21, p. 10 V. 21, p. 17			
				Amended	v. 21, p. 17	111-2-130	New	V. 20, p. 1394
92-23-10	Amended	V. 21, p. 180	99-40-21			111-2-131	New	V. 20, p. 1778
92-23-15	Amended	V. 21, p. 180	through	n		111-2-132	New	V. 20, p. 1901
92-23-16	Amended	V. 21, p. 180	99-40-47	Revoked	V. 21, p. 17	111-2-133	New	V. 20, p. 1901
92-23-17			99-40-100	Revoked	V. 21, p. 17	111-2-134	New	V. 20, p. 1901
through			99-40-101	Revoked	V. 21, p. 18	111-2-135	New	V. 21, p. 590
92-23-23	New	V. 21, p. 181	99-40-104	Revoked	V. 21, p. 18	111-2-136	New	V. 21, p. 590
92-23-25	New	V. 21, p. 181	99-40-105	Revoked	V. 21, p. 18	111-2-137	New	V. 21, p. 649
92-23-30	New	V. 21, p. 181			OF HEALING ARTS	111-2-138	New	V. 21, p. 692
92-23-31	New	V. 21, p. 182						
92-23-38	Amended	V. 21, p. 182	Reg. No.	Action	Register	111-2-139	New	V. 21, p. 747
92-23-38a	Amended	V. 21, p. 182 V. 21, p. 182	100-15-1	Amended	V. 20, p. 1093	111-3-12	Amended	V. 20, p. 40
92-23-40			100-27-1	Amended	V. 21, p. 307	111-3-35	Amended	V. 20, p. 1189
	Amended	V. 21, p. 182	100-28a-1		7.1	111-4-1795		
92-24-9			through			through		
through			100-28a-16	New	V. 20, p. 774-778	111-4-1813	New	V. 20, p. 40-47
92-24-15	Amended	V. 21, p. 314, 315	100-60-1	Revoked	V. 20, p. 774 V. 20, p. 778	111-4-1801	Amended	V. 20, p. 1095
92-24-18	Amended	V. 21, p. 315			V. 20, p. 770	111-4-1803	Amended	V. 20, p. 1095
92-24-22	Amended	V. 21, p. 316	100-60-2	Revoked	V. 20, p. 778	111-4-1805a		V. 20, p. 1095
92-24-23	Amended	V. 20, p. 1895	100-60-4	Revoked (T)	V. 20, p. 251	111-4-1814	INCW	v. 20, p. 1055
92-24-24	Amended	V. 21, p. 316	100-60-4	Revoked	V. 20, p. 778			
92-25-1	Amended	V. 20, p. 1130	100-60-5	Revoked	V. 20, p. 778	through	NT	V 20 - 410 427
92-51-33	Revoked	V. 20, p. 1130	100-60-6	Revoked	V. 20, p. 779	111-4-1823	New	V. 20, p. 419-427
92-51-40	Revoked (T)	V. 20, p. 1580	100-60-8			111-4-1818	Amended	V. 20, p. 575
92-51-40	Revoked	V. 20, p. 1895	through			111-4-1824	New	V. 20, p. 575
92-51-50	Revoked		100-60-15	Revoked	V. 20, p. 779	111-4-1825		
		V. 20, p. 1130			IORAL SCIENCES	through		
92-51-51	Revoked	V. 20, p. 1130	AGLIN	REGULATOR'		111-4-1839	New	V. 20, p. 937-942
92-51-52	Revoked	V. 20, p. 1130				111-4-1828	Amended	V. 20, p. 1096
92-51-54	Revoked	V. 20, p. 1130	Reg. No.	Action	Register	111-4-1832	Amended	V. 20, p. 1344
92-51-55	Revoked	V. 20, p. 1131	102-1-1	Amended	V. 20, p. 1897	111-4-1840	Amended	v. 20, p. 1344
92-52-9	Amended	V. 20, p. 1603	102-1-10	Revoked	V. 20, p. 1898			
92-52-9a	Amended	V. 20, p. 1604	102-1-10a	New	V. 20, p. 1898	through	3.7	17.00 1007.1100
92-53-1		•	102-1-19	New	V. 20, p. 1676 V. 20, p. 572	111-4-1844	New	V. 20, p. 1096-1100
through			102-1-19	New		111-4-1845		
92-53-7	Revoked	V. 20, p. 1131			V. 20, p. 1900	through		
92-54-1	ricvonea	7. 20, p. 1101	102-2-3	Amended	V. 21, p. 237	111-4-1850	New	V. 20, p. 1189-1193
through			102-2-4b	Amended	V. 21, p. 238	111-4-1849	Amended	V. 20, p. 1344
92-54-5	Darrahad	V 20 - 1121	102-2-15	New	V. 20, p. 572	111-4-1851	New	V. 20, p. 1345
	Revoked	V. 20, p. 1131	102-3-16	New	V. 20, p. 572	111-4-1852	New	V. 20, p. 1346
92-56-1			102-4-16	New	V. 20, p. 572			
through		V 04 4055 4050	102-4-16 102-5-15	New New	V. 20, p. 572 V. 20, p. 572	111-4-1853	New	V. 20, p. 1347
through 92-56-5	Amended	V. 21, p. 1057-1059	102-5-15	New	V. 20, p. 572	111-4-1853 111-4-1854		
through 92-56-5	Amended SENCY 93: DEPA	*	102-5-15 AGE	New ENCY 108: STAT	V. 20, p. 572 TE EMPLOYEES	111-4-1853 111-4-1854 through	New	V. 20, p. 1347
through 92-56-5 AG		RTMENT OF	102-5-15 AGE HE	New ENCY 108: STAT EALTH CARE C	V. 20, p. 572 TE EMPLOYEES OMMISSION	111-4-1853 111-4-1854 through 111-4-1870	New New	V. 20, p. 1347 V. 20, p. 1395-1405
through 92-56-5 AG	ENCY 93: DEPA REVENUE—DIV	RTMENT OF VISION OF	102-5-15 AGE	New ENCY 108: STAT	V. 20, p. 572 TE EMPLOYEES	111-4-1853 111-4-1854 through 111-4-1870 111-4-1864	New New Amended	V. 20, p. 1347 V. 20, p. 1395-1405 V. 20, p. 1569
through 92-56-5 AG	ENCY 93: DEPA REVENUE—DIV PROPERTY VAI	RTMENT OF VISION OF LUATION	102-5-15 AGE HE	New ENCY 108: STAT EALTH CARE C	V. 20, p. 572 TE EMPLOYEES OMMISSION	111-4-1853 111-4-1854 through 111-4-1870	New New Amended Amended	V. 20, p. 1347 V. 20, p. 1395-1405 V. 20, p. 1569 V. 20, p. 1570
through 92-56-5 AG Reg. No.	ENCY 93: DEPA REVENUE—DIV	RTMENT OF VISION OF	102-5-15 AGE HE Reg. No. 108-1-2	New ENCY 108: STAT EALTH CARE C Action Amended	V. 20, p. 572 TE EMPLOYEES OMMISSION Register V. 21, p. 1055	111-4-1853 111-4-1854 through 111-4-1870 111-4-1864	New New Amended	V. 20, p. 1347 V. 20, p. 1395-1405 V. 20, p. 1569
through 92-56-5 AG	ENCY 93: DEPA REVENUE—DIV PROPERTY VAI	RTMENT OF VISION OF LUATION	102-5-15 AGE HE Reg. No. 108-1-2	New ENCY 108: STAT EALTH CARE C Action Amended AGENCY 109: E	V. 20, p. 572 FE EMPLOYEES OMMISSION Register V. 21, p. 1055 BOARD OF	111-4-1853 111-4-1854 through 111-4-1870 111-4-1864 111-4-1866	New New Amended Amended	V. 20, p. 1347 V. 20, p. 1395-1405 V. 20, p. 1569 V. 20, p. 1570 V. 20, p. 1601
through 92-56-5 AG Reg. No.	ENCY 93: DEPA REVENUE—DIV PROPERTY VAI	RTMENT OF VISION OF LUATION	102-5-15 AGE HE Reg. No. 108-1-2	New ENCY 108: STATE EALTH CARE C Action Amended AGENCY 109: E RGENCY MEDI	V. 20, p. 572 FE EMPLOYEES OMMISSION Register V. 21, p. 1055 BOARD OF	111-4-1853 111-4-1854 through 111-4-1870 111-4-1866 111-4-1867 111-4-1869	New Amended Amended Amended Amended	V. 20, p. 1395-1405 V. 20, p. 1395-1405 V. 20, p. 1569 V. 20, p. 1570 V. 20, p. 1601 V. 20, p. 1601
through 92-56-5 AG Reg. No. 93-1-1	ENCY 93: DEPA REVENUE—DIV PROPERTY VAI	RTMENT OF VISION OF LUATION Register	102-5-15 AGE HE Reg. No. 108-1-2	New ENCY 108: STAT EALTH CARE C Action Amended AGENCY 109: E	V. 20, p. 572 FE EMPLOYEES OMMISSION Register V. 21, p. 1055 BOARD OF	111-4-1853 111-4-1854 through 111-4-1860 111-4-1866 111-4-1867 111-4-1869 111-4-1871	New Amended Amended Amended Amended New	V. 20, p. 1395-1405 V. 20, p. 1395-1405 V. 20, p. 1569 V. 20, p. 1570 V. 20, p. 1601 V. 20, p. 1601 V. 20, p. 1571
through 92-56-5 AG Reg. No. 93-1-1 through 93-1-4	ENCY 93: DEPA REVENUE—DIV PROPERTY VAI Action Revoked	RTMENT OF VISION OF LUATION Register V. 20, p. 452	102-5-15 AGE HE Reg. No. 108-1-2	New ENCY 108: STATE EALTH CARE C Action Amended AGENCY 109: E RGENCY MEDI	V. 20, p. 572 FE EMPLOYEES OMMISSION Register V. 21, p. 1055 BOARD OF ICAL SERVICES Register	111-4-1853 111-4-1854 through 111-4-1864 111-4-1866 111-4-1867 111-4-1871 111-4-1871	New Amended Amended Amended Amended New New	V. 20, p. 1347 V. 20, p. 1395-1405 V. 20, p. 1569 V. 20, p. 1570 V. 20, p. 1601 V. 20, p. 1571 V. 20, p. 1572
through 92-56-5 AG Reg. No. 93-1-1 through 93-1-4 93-4-6	ENCY 93: DEPA REVENUE—DIV PROPERTY VAI Action	RTMENT OF VISION OF LUATION Register	102-5-15 AGE HE Reg. No. 108-1-2 EME Reg. No.	New ENCY 108: STAT EALTH CARE C Action Amended AGENCY 109: E RGENCY MEDI Action Amended	V. 20, p. 572 TE EMPLOYEES OMMISSION Register V. 21, p. 1055 BOARD OF ICAL SERVICES Register V. 20, p. 1675	111-4-1853 111-4-1854 through 111-4-1864 111-4-1866 111-4-1867 111-4-1869 111-4-1871 111-4-1872 111-4-1873	New Amended Amended Amended Amended New	V. 20, p. 1395-1405 V. 20, p. 1395-1405 V. 20, p. 1569 V. 20, p. 1570 V. 20, p. 1601 V. 20, p. 1601 V. 20, p. 1571
Reg. No. 93-1-1 through 93-1-4 93-4-6 93-6-1	ENCY 93: DEPA REVENUE—DIV PROPERTY VAI Action Revoked	RTMENT OF VISION OF LUATION Register V. 20, p. 452	102-5-15 AGE HE Reg. No. 108-1-2 EME Reg. No. 109-9-1	New ENCY 108: STAT EALTH CARE C Action Amended AGENCY 109: E RGENCY MEDI Action Amended Amended	V. 20, p. 572 TE EMPLOYEES OMMISSION Register V. 21, p. 1055 BOARD OF ICAL SERVICES Register V. 20, p. 1675 V. 20, p. 1677	111-4-1853 111-4-1854 through 111-4-1864 111-4-1866 111-4-1867 111-4-1871 111-4-1873 111-4-1873 111-4-1874	New Amended Amended Amended Amended New New	V. 20, p. 1347 V. 20, p. 1395-1405 V. 20, p. 1569 V. 20, p. 1570 V. 20, p. 1601 V. 20, p. 1571 V. 20, p. 1572
Reg. No. 93-1-1 through 93-4-6 93-6-1 through	ENCY 93: DEPA REVENUE—DIV PROPERTY VAI Action Revoked Amended	RTMENT OF VISION OF LUATION Register V. 20, p. 452 V. 20, p. 452	102-5-15 AGE HE Reg. No. 108-1-2 EME Reg. No. 109-9-1 109-9-4 109-10-1	New ENCY 108: STAT EALTH CARE C Action Amended AGENCY 109: E RGENCY MEDI Action Amended Amended Amended Amended	V. 20, p. 572 FE EMPLOYEES OMMISSION Register V. 21, p. 1055 BOARD OF ICAL SERVICES Register V. 20, p. 1675 V. 20, p. 1677 V. 20, p. 1677	111-4-1853 111-4-1854 through 111-4-1870 111-4-1864 111-4-1866 111-4-1869 111-4-1871 111-4-1873 111-4-1873 through	New Amended Amended Amended Amended New New New	V. 20, p. 1347 V. 20, p. 1395-1405 V. 20, p. 1569 V. 20, p. 1570 V. 20, p. 1601 V. 20, p. 1601 V. 20, p. 1571 V. 20, p. 1572 V. 20, p. 1572
Reg. No. 93-1-1 through 93-4-6 93-6-1 through 93-6-4	EENCY 93: DEPA REVENUE—DIV PROPERTY VAI Action Revoked Amended Amended	V. 20, p. 452 V. 20, p. 452	102-5-15 AGE HE Reg. No. 108-1-2 EME: Reg. No. 109-9-1 109-9-4 109-10-1 109-11-10	New ENCY 108: STAT EALTH CARE C Action Amended AGENCY 109: E RGENCY MEDI Action Amended Amended Amended New	V. 20, p. 572 FE EMPLOYEES OMMISSION Register V. 21, p. 1055 BOARD OF ICAL SERVICES Register V. 20, p. 1675 V. 20, p. 1677 V. 20, p. 1677 V. 20, p. 1679	111-4-1853 111-4-1854 through 111-4-1864 111-4-1866 111-4-1867 111-4-1871 111-4-1872 111-4-1873 111-4-1874 through 111-4-1877	New Amended Amended Amended Amended New New New New	V. 20, p. 1347 V. 20, p. 1395-1405 V. 20, p. 1569 V. 20, p. 1570 V. 20, p. 1601 V. 20, p. 1601 V. 20, p. 1571 V. 20, p. 1572 V. 20, p. 1572 V. 20, p. 1779-1781
Reg. No. 93-1-1 through 93-1-4 93-4-6 93-6-1 through 93-6-4 AGENO	EENCY 93: DEPA REVENUE—DIV PROPERTY VAI Action Revoked Amended Amended	RTMENT OF VISION OF LUATION Register V. 20, p. 452 V. 20, p. 452	102-5-15 AGE HE Reg. No. 108-1-2 EME: Reg. No. 109-9-1 109-9-4 109-10-1 109-11-10 AG	New ENCY 108: STAT EALTH CARE C Action Amended AGENCY 109: E RGENCY MEDI Action Amended Amended Amended Amended New ENCY 110: DEP.	V. 20, p. 572 TE EMPLOYEES OMMISSION Register V. 21, p. 1055 BOARD OF ICAL SERVICES Register V. 20, p. 1675 V. 20, p. 1677 V. 20, p. 1677 V. 20, p. 1679 ARTMENT OF	111-4-1853 111-4-1854 through 111-4-1864 111-4-1866 111-4-1867 111-4-1871 111-4-1872 111-4-1873 111-4-1874 through 111-4-1877	New Amended Amended Amended Amended New New New	V. 20, p. 1395-1405 V. 20, p. 1395-1405 V. 20, p. 1569 V. 20, p. 1570 V. 20, p. 1601 V. 20, p. 1601 V. 20, p. 1571 V. 20, p. 1572 V. 20, p. 1572
Reg. No. 93-1-1 through 93-4-6 93-6-1 through 93-6-4	EENCY 93: DEPA REVENUE—DIV PROPERTY VAI Action Revoked Amended Amended	V. 20, p. 452 V. 20, p. 452	102-5-15 AGE HE Reg. No. 108-1-2 EME: Reg. No. 109-9-1 109-9-4 109-10-1 109-11-10 AG CC	New ENCY 108: STAT EALTH CARE C Action Amended AGENCY 109: E RGENCY MEDI Action Amended Amended Amended Amended New ENCY 110: DEP.	V. 20, p. 572 TE EMPLOYEES OMMISSION Register V. 21, p. 1055 BOARD OF ICAL SERVICES Register V. 20, p. 1675 V. 20, p. 1677 V. 20, p. 1677 V. 20, p. 1679 ARTMENT OF D HOUSING	111-4-1853 111-4-1854 through 111-4-1864 111-4-1866 111-4-1869 111-4-1871 111-4-1873 111-4-1874 through 111-4-1877 111-4-1877 111-4-1877	New Amended Amended Amended Amended New New New New	V. 20, p. 1347 V. 20, p. 1395-1405 V. 20, p. 1569 V. 20, p. 1570 V. 20, p. 1601 V. 20, p. 1601 V. 20, p. 1571 V. 20, p. 1572 V. 20, p. 1572 V. 20, p. 1779-1781
Reg. No. 93-1-1 through 93-1-4 93-4-6 93-6-1 through 93-6-4 AGENO Reg. No.	EENCY 93: DEPA REVENUE—DIV PROPERTY VAI Action Revoked Amended Amended CY 94: BOARD C	V. 20, p. 452 V. 20, p. 452 V. 20, p. 452 V. 20, p. 452	102-5-15 AGE HE Reg. No. 108-1-2 EME: Reg. No. 109-9-1 109-9-4 109-10-1 109-11-10 AG	New ENCY 108: STAT EALTH CARE C Action Amended AGENCY 109: E RGENCY MEDI Action Amended Amended Amended Amended New ENCY 110: DEP.	V. 20, p. 572 TE EMPLOYEES OMMISSION Register V. 21, p. 1055 BOARD OF ICAL SERVICES Register V. 20, p. 1675 V. 20, p. 1677 V. 20, p. 1677 V. 20, p. 1679 ARTMENT OF	111-4-1853 111-4-1854 through 111-4-1870 111-4-1864 111-4-1866 111-4-1871 111-4-1872 111-4-1873 111-4-1874 through 111-4-1877 111-4-1877 111-4-1878 through	New Amended Amended Amended Amended New New New New	V. 20, p. 1395-1405 V. 20, p. 1395-1405 V. 20, p. 1569 V. 20, p. 1570 V. 20, p. 1601 V. 20, p. 1601 V. 20, p. 1571 V. 20, p. 1572 V. 20, p. 1572 V. 20, p. 1572 V. 20, p. 1779-1781 V. 20, p. 1902
Reg. No. 93-1-1 through 93-1-4 93-4-6 93-6-1 through 93-6-4 AGENO Reg. No. 94-2-1	EENCY 93: DEPA REVENUE—DIV PROPERTY VAI Action Revoked Amended Amended CY 94: BOARD C	V. 20, p. 452 V. 20, p. 452 V. 20, p. 452 V. 20, p. 452	102-5-15 AGE HE Reg. No. 108-1-2 EME: Reg. No. 109-9-1 109-9-4 109-10-1 109-11-10 AG CC	New ENCY 108: STAT EALTH CARE C Action Amended AGENCY 109: E RGENCY MEDI Action Amended Amended Amended Amended New ENCY 110: DEP. OMMERCE AN Action	V. 20, p. 572 TE EMPLOYEES OMMISSION Register V. 21, p. 1055 BOARD OF ICAL SERVICES Register V. 20, p. 1675 V. 20, p. 1677 V. 20, p. 1677 V. 20, p. 1679 ARTMENT OF D HOUSING Register	111-4-1853 111-4-1854 through 111-4-1864 111-4-1866 111-4-1869 111-4-1871 111-4-1873 111-4-1874 through 111-4-1877 111-4-1877 111-4-1877	New Amended Amended Amended Amended New New New New	V. 20, p. 1347 V. 20, p. 1395-1405 V. 20, p. 1569 V. 20, p. 1570 V. 20, p. 1601 V. 20, p. 1601 V. 20, p. 1571 V. 20, p. 1572 V. 20, p. 1572 V. 20, p. 1779-1781
Reg. No. 93-1-1 through 93-4-6 93-6-1 through 93-6-4 AGENO Reg. No.	EENCY 93: DEPA REVENUE—DIV PROPERTY VAI Action Revoked Amended Amended CY 94: BOARD C Action	RTMENT OF VISION OF LUATION Register V. 20, p. 452 V. 20, p. 452 V. 20, p. 452 V. 20, p. 452 Register	102-5-15 AGE HE Reg. No. 108-1-2 EME. Reg. No. 109-9-1 109-9-4 109-10-1 109-11-10 AG CC Reg. No. 110-4-1	New ENCY 108: STAT EALTH CARE C Action Amended AGENCY 109: E RGENCY MEDI Action Amended Amended Amended New ENCY 110: DEP OMMERCE AN Action	V. 20, p. 572 TE EMPLOYEES OMMISSION Register V. 21, p. 1055 BOARD OF ICAL SERVICES Register V. 20, p. 1675 V. 20, p. 1677 V. 20, p. 1677 V. 20, p. 1677 V. 20, p. 1679 ARTMENT OF D HOUSING Register V. 20, p. 1392	111-4-1853 111-4-1854 through 111-4-1870 111-4-1864 111-4-1866 111-4-1871 111-4-1872 111-4-1873 111-4-1874 through 111-4-1877 111-4-1877 111-4-1878 through	New Amended Amended Amended Amended New New New New Amended	V. 20, p. 1395-1405 V. 20, p. 1395-1405 V. 20, p. 1569 V. 20, p. 1570 V. 20, p. 1601 V. 20, p. 1601 V. 20, p. 1571 V. 20, p. 1572 V. 20, p. 1572 V. 20, p. 1572 V. 20, p. 1779-1781 V. 20, p. 1902
Reg. No. 93-1-1 through 93-4-93-4-6 93-6-1 through 93-6-4 AGENO Reg. No. 94-2-1 through 94-2-18	EENCY 93: DEPA REVENUE—DIV PROPERTY VAI Action Revoked Amended Amended CY 94: BOARD C Action Amended	V. 20, p. 452 V. 20, p. 453 OF TAX APPEALS Register	102-5-15 AGE HE Reg. No. 108-1-2 EME. Reg. No. 109-9-1 109-9-4 109-10-1 109-11-10 AG CO Reg. No. 110-4-1 110-6-1	New ENCY 108: STAT EALTH CARE C Action Amended AGENCY 109: E RGENCY MEDI Action Amended Amended Amended New ENCY 110: DEP. OMMERCE AN Action Amended Amended	V. 20, p. 572 FE EMPLOYEES OMMISSION Register V. 21, p. 1055 BOARD OF ICAL SERVICES Register V. 20, p. 1675 V. 20, p. 1677 V. 20, p. 1677 V. 20, p. 1679 ARTMENT OF D HOUSING Register V. 20, p. 1392 V. 20, p. 177	111-4-1853 111-4-1854 through 111-4-1866 111-4-1866 111-4-1867 111-4-1871 111-4-1872 111-4-1873 111-4-1874 through 111-4-1878 through 111-4-1885 111-4-1885	New Amended Amended Amended Amended New New New New Amended	V. 20, p. 1395-1405 V. 20, p. 1395-1405 V. 20, p. 1569 V. 20, p. 1570 V. 20, p. 1601 V. 20, p. 1601 V. 20, p. 1571 V. 20, p. 1572 V. 20, p. 1572 V. 20, p. 1572 V. 20, p. 1779-1781 V. 20, p. 1902
Reg. No. 93-1-1 through 93-4-6 93-6-1 through 93-6-4 AGENO Reg. No. 94-2-1 through 94-2-19	EENCY 93: DEPA REVENUE—DIV PROPERTY VAI Action Revoked Amended Amended CY 94: BOARD C Action Amended Amended	V. 20, p. 452 V. 20, p. 452 V. 20, p. 452 V. 20, p. 452 V. 20, p. 452, 453 OF TAX APPEALS Register V. 21, p. 703-708 V. 21, p. 708	102-5-15 AGE HE Reg. No. 108-1-2 EME: Reg. No. 109-9-1 109-9-4 109-10-1 109-11-10 AG CC Reg. No. 110-4-1 110-6-1 110-6-1	New ENCY 108: STAT EALTH CARE C Action Amended AGENCY 109: E RGENCY MEDI Action Amended Amended Amended New ENCY 110: DEP OMMERCE AN Action Amended Amended Amended Action	V. 20, p. 572 TE EMPLOYEES OMMISSION Register V. 21, p. 1055 BOARD OF ICAL SERVICES Register V. 20, p. 1675 V. 20, p. 1677 V. 20, p. 1677 V. 20, p. 1679 ARTMENT OF D HOUSING Register V. 20, p. 1392 V. 20, p. 177 V. 20, p. 178	111-4-1853 111-4-1854 through 111-4-1864 111-4-1866 111-4-1869 111-4-1871 111-4-1872 111-4-1873 111-4-1874 through 111-4-1878 through 111-4-1888 through	New Amended Amended Amended Amended New New New New Amended	V. 20, p. 1395-1405 V. 20, p. 1395-1405 V. 20, p. 1569 V. 20, p. 1601 V. 20, p. 1601 V. 20, p. 1571 V. 20, p. 1572 V. 20, p. 1572 V. 20, p. 1779-1781 V. 20, p. 1902
Reg. No. 93-1-1 through 93-1-4 93-4-6 93-6-1 through 93-6-4 AGENO Reg. No. 94-2-1 through 94-2-19 94-2-20	EENCY 93: DEPA REVENUE—DIV PROPERTY VAI Action Revoked Amended Amended CY 94: BOARD C Action Amended New New	V. 20, p. 452 V. 20, p. 452 V. 20, p. 452 V. 20, p. 452 V. 21, p. 703-708 V. 21, p. 708 V. 21, p. 708 V. 21, p. 708	102-5-15 AGE HE Reg. No. 108-1-2 EME: Reg. No. 109-9-1 109-9-4 109-10-1 109-11-10 AG CG Reg. No. 110-4-1 110-6-1 110-6-1 110-6-2	New ENCY 108: STAT EALTH CARE C Action Amended AGENCY 109: E RGENCY MEDI Action Amended Amended Amended New ENCY 110: DEP. OMMERCE AN Action Amended	V. 20, p. 572 TE EMPLOYEES OMMISSION Register V. 21, p. 1055 BOARD OF ICAL SERVICES Register V. 20, p. 1675 V. 20, p. 1677 V. 20, p. 1677 V. 20, p. 1677 D. 20, p. 1679 ARTMENT OF D HOUSING Register V. 20, p. 1392 V. 20, p. 177 V. 20, p. 178 V. 20, p. 178 V. 20, p. 178	111-4-1853 111-4-1854 through 111-4-1864 111-4-1866 111-4-1867 111-4-1871 111-4-1872 111-4-1873 111-4-1877 111-4-1877 111-4-1878 through 111-4-1885 111-4-1886 through 111-4-1886	New Amended Amended Amended Amended New New New New Amended	V. 20, p. 1395-1405 V. 20, p. 1395-1405 V. 20, p. 1569 V. 20, p. 1570 V. 20, p. 1601 V. 20, p. 1601 V. 20, p. 1571 V. 20, p. 1572 V. 20, p. 1572 V. 20, p. 1572 V. 20, p. 1779-1781 V. 20, p. 1902
Reg. No. 93-1-1 through 92-56-5 AG 93-1-1 through 93-6-4 AGENG Reg. No. 94-2-1 through 94-2-18 94-2-19 94-3-1	EENCY 93: DEPA REVENUE—DIV PROPERTY VAI Action Revoked Amended Amended CY 94: BOARD C Action Amended New New Amended	V. 20, p. 452 V. 21, p. 703-708 V. 21, p. 708 V. 21, p. 708 V. 21, p. 708 V. 21, p. 709	102-5-15 AGE HE Reg. No. 108-1-2 EME: Reg. No. 109-9-1 109-9-1 109-11-10 AG CO Reg. No. 110-4-1 110-6-1 110-6-2 110-6-3	New ENCY 108: STAT EALTH CARE C Action Amended AGENCY 109: E RGENCY MEDI Action Amended Amended Amended New ENCY 110: DEP. OMMERCE AN Action Amended	V. 20, p. 572 TE EMPLOYEES OMMISSION Register V. 21, p. 1055 BOARD OF ICAL SERVICES Register V. 20, p. 1675 V. 20, p. 1677 V. 20, p. 1677 V. 20, p. 1679 ARTMENT OF D HOUSING Register V. 20, p. 179 V. 20, p. 179 V. 20, p. 178 V. 20, p. 178 V. 20, p. 178 V. 20, p. 178	111-4-1853 111-4-1854 through 111-4-1864 111-4-1866 111-4-1867 111-4-1871 111-4-1872 111-4-1873 111-4-1877 111-4-1877 111-4-1877 111-4-1878 through 111-4-1885 111-4-1885 111-4-1889 111-4-1889	New Amended Amended Amended Amended New New New New Amended	V. 20, p. 1395-1405 V. 20, p. 1395-1405 V. 20, p. 1569 V. 20, p. 1601 V. 20, p. 1601 V. 20, p. 1571 V. 20, p. 1572 V. 20, p. 1572 V. 20, p. 1779-1781 V. 20, p. 1902
Reg. No. 93-1-1 through 93-4-4 93-6-1 through 93-6-4 AGENO Reg. No. 94-2-1 through 94-2-18 94-2-19 94-2-20 94-3-1 94-3-2	EENCY 93: DEPA REVENUE—DIV PROPERTY VAI Action Revoked Amended Amended CY 94: BOARD C Action Amended New New	V. 20, p. 452 V. 20, p. 452 V. 20, p. 452 V. 20, p. 452 V. 21, p. 703-708 V. 21, p. 708 V. 21, p. 708 V. 21, p. 708	102-5-15 AGE HE Reg. No. 108-1-2 EME: Reg. No. 109-9-1 109-10-1 109-11-10 AG CO Reg. No. 110-4-1 110-6-1 110-6-1 110-6-2 110-6-3 110-6-4	New ENCY 108: STAT EALTH CARE C Action Amended AGENCY 109: E RGENCY MEDI Action Amended Amended Amended New ENCY 110: DEP OMMERCE AN Action Amended	V. 20, p. 572 TE EMPLOYEES OMMISSION Register V. 21, p. 1055 BOARD OF ICAL SERVICES Register V. 20, p. 1675 V. 20, p. 1677 V. 20, p. 1677 V. 20, p. 1679 ARTMENT OF D HOUSING Register V. 20, p. 178 V. 20, p. 179	111-4-1853 111-4-1854 through 111-4-1864 111-4-1866 111-4-1867 111-4-1869 111-4-1872 111-4-1873 111-4-1873 111-4-1874 through 111-4-1878 through 111-4-1885 111-4-1886 through 111-4-1889 111-4-1889 111-4-1889 111-4-1889	New Amended Amended Amended Amended New New New New New New Amended	V. 20, p. 1395-1405 V. 20, p. 1395-1405 V. 20, p. 1569 V. 20, p. 1570 V. 20, p. 1601 V. 20, p. 1601 V. 20, p. 1571 V. 20, p. 1572 V. 20, p. 1572 V. 20, p. 1779-1781 V. 20, p. 1902 V. 20, p. 1902-1906 V. 21, p. 183-185
Reg. No. 93-1-1 through 92-56-5 AG 93-1-1 through 93-6-4 AGENG Reg. No. 94-2-1 through 94-2-18 94-2-19 94-3-1	EENCY 93: DEPA REVENUE—DIV PROPERTY VAI Action Revoked Amended Amended CY 94: BOARD C Action Amended New New Amended	V. 20, p. 452 V. 21, p. 703-708 V. 21, p. 708 V. 21, p. 708 V. 21, p. 708 V. 21, p. 709	102-5-15 AGE HE Reg. No. 108-1-2 EME: Reg. No. 109-9-1 109-9-4 109-10-1 109-11-10 AG CC Reg. No. 110-4-1 110-6-1 110-6-2 110-6-3 110-6-4 110-6-5	New ENCY 108: STAT EALTH CARE C Action Amended AGENCY 109: E RGENCY MEDI Action Amended Amended Amended New ENCY 110: DEP. OMMERCE AN Action Amended	V. 20, p. 572 TE EMPLOYEES OMMISSION Register V. 21, p. 1055 BOARD OF ICAL SERVICES Register V. 20, p. 1675 V. 20, p. 1677 V. 20, p. 1677 V. 20, p. 1679 ARTMENT OF D HOUSING Register V. 20, p. 179 V. 20, p. 179 V. 20, p. 178 V. 20, p. 178 V. 20, p. 178 V. 20, p. 178	111-4-1853 111-4-1854 through 111-4-1864 111-4-1866 111-4-1869 111-4-1871 111-4-1872 111-4-1873 111-4-1877 111-4-1877 111-4-1878 through 111-4-1885 111-4-1886 through 111-4-1889 111-4-1889 111-4-1889	New Amended Amended Amended Amended New New New New Amended	V. 20, p. 1395-1405 V. 20, p. 1395-1405 V. 20, p. 1569 V. 20, p. 1601 V. 20, p. 1601 V. 20, p. 1571 V. 20, p. 1572 V. 20, p. 1572 V. 20, p. 1779-1781 V. 20, p. 1902
Reg. No. 93-1-1 through 93-4-4 93-6-1 through 93-6-4 AGENO Reg. No. 94-2-1 through 94-2-18 94-2-19 94-2-20 94-3-1 94-3-2	EENCY 93: DEPA REVENUE—DIV PROPERTY VAI Action Revoked Amended Amended CY 94: BOARD C Action Amended New New Amended Amended Amended Amended Amended	V. 20, p. 452 V. 21, p. 703-708 V. 21, p. 708 V. 21, p. 708 V. 21, p. 709 V. 21, p. 710	102-5-15 AGE HE Reg. No. 108-1-2 EME: Reg. No. 109-9-1 109-9-4 109-10-1 109-11-10 AG CC Reg. No. 110-4-1 110-6-1 110-6-1 110-6-2 110-6-3 110-6-4 110-6-5 110-7-1	New ENCY 108: STAT EALTH CARE C Action Amended AGENCY 109: E RGENCY MEDI Action Amended Amended Amended New ENCY 110: DEP OMMERCE AN Action Amended	V. 20, p. 572 TE EMPLOYEES OMMISSION Register V. 21, p. 1055 BOARD OF ICAL SERVICES Register V. 20, p. 1675 V. 20, p. 1677 V. 20, p. 1677 V. 20, p. 1679 ARTMENT OF D HOUSING Register V. 20, p. 178 V. 20, p. 179	111-4-1853 111-4-1854 through 111-4-1864 111-4-1866 111-4-1869 111-4-1871 111-4-1872 111-4-1873 111-4-1877 111-4-1877 111-4-1878 through 111-4-1885 111-4-1886 through 111-4-1889 111-4-1889 111-4-1890 through 111-4-1893 111-4-1893	New Amended Amended Amended Amended New New New New New New Amended	V. 20, p. 1395-1405 V. 20, p. 1395-1405 V. 20, p. 1569 V. 20, p. 1570 V. 20, p. 1601 V. 20, p. 1601 V. 20, p. 1571 V. 20, p. 1572 V. 20, p. 1572 V. 20, p. 1779-1781 V. 20, p. 1902 V. 20, p. 1902-1906 V. 21, p. 183-185
Reg. No. 93-1-1 through 93-4-6 93-6-1 through 93-6-4 AGENO Reg. No. 94-2-1 through 94-2-19 94-2-20 94-3-1 94-3-2 94-4-1	REVENUE—DIV PROPERTY VAI Action Revoked Amended Amended Amended Action Amended New New Amended Amended Amended Amended Amended New	V. 20, p. 452 V. 21, p. 703-708 V. 21, p. 708 V. 21, p. 708 V. 21, p. 709 V. 21, p. 709 V. 21, p. 710 V. 21, p. 710 V. 21, p. 710	102-5-15 AGE HE Reg. No. 108-1-2 EME: Reg. No. 109-9-1 109-9-4 109-10-1 109-11-10 AG CO Reg. No. 110-4-1 110-6-1 110-6-3 110-6-3 110-6-4 110-6-5 110-7-1 through	New ENCY 108: STAT EALTH CARE C Action Amended AGENCY 109: E RGENCY MEDI Action Amended Amended Amended New ENCY 110: DEP. OMMERCE AN Action Amended	V. 20, p. 572 TE EMPLOYEES OMMISSION Register V. 21, p. 1055 BOARD OF ICAL SERVICES Register V. 20, p. 1677 V. 20, p. 1677 V. 20, p. 1677 V. 20, p. 1679 ARTMENT OF D HOUSING Register V. 20, p. 179 V. 20, p. 178 V. 20, p. 179 V. 20, p. 179 V. 20, p. 179 V. 20, p. 179 V. 20, p. 180	111-4-1853 111-4-1854 through 111-4-1864 111-4-1866 111-4-1867 111-4-1871 111-4-1872 111-4-1873 111-4-1877 111-4-1877 111-4-1877 111-4-1887 through 111-4-1885 111-4-1886 through 111-4-1889 111-4-1890 through 111-4-1893 111-4-1893 111-4-1893	New New Amended Amended Amended New New New New New New Amended New Amended New Amended	V. 20, p. 1395-1405 V. 20, p. 1395-1405 V. 20, p. 1569 V. 20, p. 1570 V. 20, p. 1601 V. 20, p. 1601 V. 20, p. 1571 V. 20, p. 1572 V. 20, p. 1572 V. 20, p. 1779-1781 V. 20, p. 1902 V. 20, p. 1902-1906 V. 21, p. 183-185 V. 21, p. 591-593
Reg. No. 93-1-1 through 93-1-4 93-4-6 93-6-1 through 93-6-4 AGENO Reg. No. 94-2-1 through 94-2-19 94-3-1 94-2-20 94-3-1 94-3-2 94-4-1 94-4-2 AG	EENCY 93: DEPA REVENUE—DIV PROPERTY VAI Action Revoked Amended Amended CY 94: BOARD C Action Amended New New Amended Amended New New Amended New New New SENCY 99: DEPA	V. 20, p. 452 V. 21, p. 703-708 V. 21, p. 708 V. 21, p. 708 V. 21, p. 709 V. 21, p. 710 V. 21, p. 710 V. 21, p. 710 V. 21, p. 710	102-5-15 AGE HE Reg. No. 108-1-2 EME: Reg. No. 109-9-1 109-9-4 109-10-1 109-11-10 AG CC Reg. No. 110-4-1 110-6-1 110-6-1 110-6-2 110-6-3 110-6-4 110-6-5 110-7-1	New ENCY 108: STAT EALTH CARE C Action Amended AGENCY 109: E RGENCY MEDI Action Amended Amended Amended New ENCY 110: DEP OMMERCE AN Action Amended	V. 20, p. 572 TE EMPLOYEES OMMISSION Register V. 21, p. 1055 BOARD OF ICAL SERVICES Register V. 20, p. 1675 V. 20, p. 1677 V. 20, p. 1677 V. 20, p. 1679 ARTMENT OF D HOUSING Register V. 20, p. 179 V. 20, p. 178 V. 20, p. 179 V. 20, p. 180 V. 20, p. 180	111-4-1853 111-4-1854 through 111-4-1864 111-4-1866 111-4-1867 111-4-1871 111-4-1872 111-4-1873 111-4-1873 111-4-1877 111-4-1877 111-4-1878 through 111-4-1885 111-4-1886 through 111-4-1889 through 111-4-1890 through 111-4-1890 through 111-4-1893 111-4-1893 111-4-1894 through	New Amended Amended Amended Amended New New New New New New Amended	V. 20, p. 1395-1405 V. 20, p. 1395-1405 V. 20, p. 1569 V. 20, p. 1570 V. 20, p. 1601 V. 20, p. 1601 V. 20, p. 1571 V. 20, p. 1572 V. 20, p. 1572 V. 20, p. 1779-1781 V. 20, p. 1902 V. 20, p. 1902-1906 V. 21, p. 183-185
Reg. No. 93-1-1 through 93-4-6 93-6-1 through 93-6-4 AGENO Reg. No. 94-2-1 through 94-2-18 94-2-19 94-3-1 94-3-2 94-4-1 94-4-2 AGG	ENCY 93: DEPA REVENUE—DIV PROPERTY VAI Action Revoked Amended Amended CY 94: BOARD C Action Amended New New Amended Amended New New Amended Amended New New SENCY 99: DEPA GRICULTURE—E	V. 20, p. 452 V. 21, p. 703-708 V. 21, p. 708 V. 21, p. 708 V. 21, p. 709 V. 21, p. 709 V. 21, p. 709 V. 21, p. 710 V. 21, p. 71	102-5-15 AGE HE Reg. No. 108-1-2 EME: Reg. No. 109-9-1 109-9-4 109-10-1 109-11-10 AG CO Reg. No. 110-4-1 110-6-1 110-6-3 110-6-3 110-6-4 110-6-5 110-7-1 through	New ENCY 108: STAT EALTH CARE C Action Amended AGENCY 109: E RGENCY MEDI Action Amended Amended Amended New ENCY 110: DEP. OMMERCE AN Action Amended	V. 20, p. 572 TE EMPLOYEES OMMISSION Register V. 21, p. 1055 BOARD OF ICAL SERVICES Register V. 20, p. 1675 V. 20, p. 1677 V. 20, p. 1677 V. 20, p. 1679 ARTMENT OF D HOUSING Register V. 20, p. 179 V. 20, p. 178 V. 20, p. 179 V. 20, p. 180 V. 20, p. 180	111-4-1853 111-4-1854 through 111-4-1864 111-4-1866 111-4-1867 111-4-1871 111-4-1872 111-4-1873 111-4-1877 111-4-1877 111-4-1877 111-4-1887 through 111-4-1885 111-4-1886 through 111-4-1889 111-4-1890 through 111-4-1893 111-4-1893 111-4-1893	New New Amended Amended Amended New New New New New New Amended New Amended	V. 20, p. 1395-1405 V. 20, p. 1395-1405 V. 20, p. 1569 V. 20, p. 1570 V. 20, p. 1601 V. 20, p. 1601 V. 20, p. 1571 V. 20, p. 1572 V. 20, p. 1572 V. 20, p. 1779-1781 V. 20, p. 1902 V. 20, p. 1902-1906 V. 21, p. 183-185 V. 21, p. 591-593
Reg. No. 93-1-1 through 93-4-6 93-6-1 through 93-6-4 AGENO Reg. No. 94-2-1 through 94-2-18 94-2-19 94-3-1 94-3-2 94-4-1 94-4-2 AG	ENCY 93: DEPA REVENUE—DIV PROPERTY VAI Action Revoked Amended Amended CY 94: BOARD C Action Amended New New Amended New New EENCY 99: DEPA RICULTURE—I VEIGHTS AND I	V. 20, p. 452 V. 21, p. 703-708 V. 21, p. 708 V. 21, p. 708 V. 21, p. 709 V. 21, p. 709 V. 21, p. 710 V. 21, p. 71	102-5-15 AGE HE Reg. No. 108-1-2 EME: Reg. No. 109-9-1 109-9-4 109-10-1 109-11-10 AG CO Reg. No. 110-4-1 110-6-1 110-6-1 110-6-2 110-6-3 110-6-4 110-6-5 110-7-1 through 110-7-4	New ENCY 108: STAT EALTH CARE C Action Amended AGENCY 109: E RGENCY MEDI Action Amended Amended Amended New ENCY 110: DEP OMMERCE AN Action Amended	V. 20, p. 572 TE EMPLOYEES OMMISSION Register V. 21, p. 1055 BOARD OF ICAL SERVICES Register V. 20, p. 1675 V. 20, p. 1677 V. 20, p. 1677 V. 20, p. 1679 ARTMENT OF D HOUSING Register V. 20, p. 1392 V. 20, p. 178 V. 20, p. 179 V. 20, p. 180 V. 20, p. 180 V. 20, p. 1426 V. 20, p. 1426 V. 20, p. 1426	111-4-1853 111-4-1854 through 111-4-1864 111-4-1866 111-4-1867 111-4-1871 111-4-1872 111-4-1873 111-4-1873 111-4-1877 111-4-1877 111-4-1878 through 111-4-1885 111-4-1886 through 111-4-1889 through 111-4-1890 through 111-4-1890 through 111-4-1893 111-4-1893 111-4-1894 through	New New Amended Amended Amended New New New New New New Amended New Amended	V. 20, p. 1395-1405 V. 20, p. 1395-1405 V. 20, p. 1569 V. 20, p. 1570 V. 20, p. 1601 V. 20, p. 1601 V. 20, p. 1571 V. 20, p. 1572 V. 20, p. 1572 V. 20, p. 1779-1781 V. 20, p. 1902 V. 20, p. 1902-1906 V. 21, p. 183-185 V. 21, p. 591-593
Reg. No. 93-1-1 through 93-4-6 93-6-1 through 93-6-4 AGENO Reg. No. 94-2-1 through 94-2-18 94-2-19 94-3-1 94-3-2 94-4-1 94-4-2 AGG	ENCY 93: DEPA REVENUE—DIV PROPERTY VAI Action Revoked Amended Amended CY 94: BOARD C Action Amended New New Amended Amended New New Amended Amended New New SENCY 99: DEPA GRICULTURE—E	V. 20, p. 452 V. 21, p. 703-708 V. 21, p. 708 V. 21, p. 708 V. 21, p. 709 V. 21, p. 709 V. 21, p. 709 V. 21, p. 710 V. 21, p. 71	102-5-15 AGE HE Reg. No. 108-1-2 EME: Reg. No. 109-9-1 109-9-4 109-10-1 109-11-10 AG CO Reg. No. 110-4-1 110-6-1 110-6-2 110-6-3 110-6-4 110-6-5 110-7-1 through 110-7-5 110-7-6	New ENCY 108: STAT EALTH CARE C Action Amended AGENCY 109: E RGENCY MEDI Action Amended Amended Amended New ENCY 110: DEP. OMMERCE AN Action Amended	V. 20, p. 572 TE EMPLOYEES OMMISSION Register V. 21, p. 1055 BOARD OF ICAL SERVICES Register V. 20, p. 1675 V. 20, p. 1677 V. 20, p. 1677 V. 20, p. 1677 P. 20, p. 1679 ARTMENT OF D HOUSING Register V. 20, p. 179 V. 20, p. 178 V. 20, p. 179 V. 20, p. 179 V. 20, p. 180 V. 20, p. 1426	111-4-1853 111-4-1854 through 111-4-1864 111-4-1866 111-4-1869 111-4-1871 111-4-1872 111-4-1873 111-4-1874 through 111-4-1878 through 111-4-1885 111-4-1886 through 111-4-1889 111-4-1890 through 111-4-1893 111-4-1894 through 111-4-1890 111-4-1894	New New Amended Amended Amended New New New New New New Amended New Amended	V. 20, p. 1395-1405 V. 20, p. 1395-1405 V. 20, p. 1569 V. 20, p. 1570 V. 20, p. 1601 V. 20, p. 1601 V. 20, p. 1571 V. 20, p. 1572 V. 20, p. 1572 V. 20, p. 1779-1781 V. 20, p. 1902 V. 20, p. 1902-1906 V. 21, p. 183-185 V. 21, p. 591-593
Reg. No. 93-1-1 through 93-1-4 93-4-6 93-6-1 through 93-6-4 AGENO Reg. No. 94-2-1 through 94-2-18 94-2-19 94-2-20 94-3-1 94-3-2 94-4-1 94-4-2 AG	EENCY 93: DEPA REVENUE—DIV PROPERTY VAI Action Revoked Amended Amended CY 94: BOARD C Action Amended New New Amended Amended New New EENCY 99: DEPA RICULTURE—I VEIGHTS AND M	V. 20, p. 452 V. 21, p. 703-708 V. 21, p. 708 V. 21, p. 708 V. 21, p. 708 V. 21, p. 709 V. 21, p. 709 V. 21, p. 710 V. 21, p. 71	102-5-15 AGE HE Reg. No. 108-1-2 EME. Reg. No. 109-9-1 109-9-4 109-10-1 109-11-10 AG CO Reg. No. 110-4-1 110-6-1 110-6-3 110-6-3 110-6-4 110-6-5 110-7-1 through 110-7-4 110-7-5 110-7-6 110-7-8	New ENCY 108: STAT EALTH CARE C Action Amended AGENCY 109: E RGENCY MEDI Action Amended Amended Amended New ENCY 110: DEP. OMMERCE AN Action Amended New New New New	V. 20, p. 572 TE EMPLOYEES OMMISSION Register V. 21, p. 1055 BOARD OF ICAL SERVICES Register V. 20, p. 1675 V. 20, p. 1677 V. 20, p. 1677 V. 20, p. 1679 ARTMENT OF D HOUSING Register V. 20, p. 179 V. 20, p. 178 V. 20, p. 179 V. 20, p. 180 V. 20, p. 1426	111-4-1853 111-4-1854 through 111-4-1864 111-4-1866 111-4-1869 111-4-1871 111-4-1872 111-4-1873 111-4-1877 111-4-1877 111-4-1877 111-4-1889 111-4-1888 through 111-4-1889 111-4-1890 through 111-4-1893 111-4-1894 through 111-4-1894 through 111-4-1894 through 111-4-1900 111-4-1900 111-4-1900	New New Amended Amended Amended New New New New New Amended New Amended New Amended	V. 20, p. 1395-1405 V. 20, p. 1395-1405 V. 20, p. 1569 V. 20, p. 1570 V. 20, p. 1601 V. 20, p. 1601 V. 20, p. 1571 V. 20, p. 1572 V. 20, p. 1572 V. 20, p. 1572 V. 20, p. 1902 V. 20, p. 1902 V. 21, p. 183-185 V. 21, p. 591-593 V. 21, p. 649-655
Reg. No. 93-1-1 through 93-1-4 93-4-6 93-6-1 through 93-6-4 AGENO Reg. No. 94-2-1 through 94-2-18 94-2-20 94-3-1 94-3-2 94-4-1 94-4-2 AG Reg. No. 99-8-8	EENCY 93: DEPA REVENUE—DIV PROPERTY VAI Action Revoked Amended Amended CY 94: BOARD C Action Amended New New Amended New New Amended Amended New New Amended New New Amended Amended New New Amended New New Amended New New Amended New New New Amended RENCY 99: DEPA RICULTURE—E VEIGHTS AND M Action Revoked	V. 20, p. 452 V. 20, p. 452 V. 20, p. 452 V. 20, p. 452 V. 20, p. 452, 453 OF TAX APPEALS Register V. 21, p. 703-708 V. 21, p. 708 V. 21, p. 708 V. 21, p. 709 V. 21, p. 709 V. 21, p. 709 V. 21, p. 710 V. 21, p. 710	102-5-15 AGE HE Reg. No. 108-1-2 EME: Reg. No. 109-9-1 109-9-4 109-10-1 109-11-10 AG CO Reg. No. 110-4-1 110-6-1 110-6-2 110-6-3 110-6-4 110-6-5 110-7-1 through 110-7-4 110-7-5 110-7-6 110-7-8 110-7-9	New ENCY 108: STAT EALTH CARE C Action Amended AGENCY 109: E RGENCY MEDI Action Amended Amended Amended New ENCY 110: DEP OMMERCE AN Action Amended New New New New New New	V. 20, p. 572 TE EMPLOYEES OMMISSION Register V. 21, p. 1055 BOARD OF ICAL SERVICES Register V. 20, p. 1675 V. 20, p. 1677 V. 20, p. 1677 V. 20, p. 1679 ARTMENT OF D HOUSING Register V. 20, p. 178 V. 20, p. 180 V. 20, p. 1426	111-4-1853 111-4-1854 through 111-4-1864 111-4-1866 111-4-1867 111-4-1871 111-4-1871 111-4-1873 111-4-1874 through 111-4-1878 through 111-4-1886 through 111-4-1889 111-4-1889 111-4-1890 through 111-4-1890 through 111-4-1900 111-4-1900 111-4-1901	New New Amended Amended Amended New New New New New Amended New Amended New Amended New Amended	V. 20, p. 1395-1405 V. 20, p. 1395-1405 V. 20, p. 1569 V. 20, p. 1570 V. 20, p. 1601 V. 20, p. 1601 V. 20, p. 1571 V. 20, p. 1572 V. 20, p. 1572 V. 20, p. 1572 V. 20, p. 1779-1781 V. 20, p. 1902 V. 20, p. 1902-1906 V. 21, p. 183-185 V. 21, p. 591-593 V. 21, p. 649-655 V. 21, p. 692-702 V. 21, p. 747
Reg. No. 93-1-1 through 93-1-4 93-4-6 93-6-1 through 93-6-1 through 93-6-2 AGENO Reg. No. 94-2-1 through 94-2-18 94-2-19 94-3-1 94-3-2 94-4-1 94-4-2 AG AG W Reg. No. 99-8-8 99-8-9	EENCY 93: DEPA REVENUE—DIV PROPERTY VAI Action Revoked Amended Amended CY 94: BOARD C Action Amended New New Amended Amended New New SENCY 99: DEPA RICULTURE—I VEIGHTS AND I Action Revoked Revoked Revoked	V. 20, p. 452 V. 21, p. 703-708 V. 21, p. 708 V. 21, p. 708 V. 21, p. 709 V. 21, p. 709 V. 21, p. 710 V. 21, p. 710	102-5-15 AGE HE Reg. No. 108-1-2 EME: Reg. No. 109-9-1 109-9-4 109-10-1 109-11-10 AG CC Reg. No. 110-4-1 110-6-1 110-6-3 110-6-2 110-6-3 110-6-4 110-6-5 110-7-1 through 110-7-4 110-7-6 110-7-8 110-7-9 110-7-10	New ENCY 108: STAT EALTH CARE C Action Amended AGENCY 109: E RGENCY MEDI Action Amended	V. 20, p. 572 TE EMPLOYEES OMMISSION Register V. 21, p. 1055 BOARD OF ICAL SERVICES Register V. 20, p. 1675 V. 20, p. 1677 V. 20, p. 1677 V. 20, p. 1679 ARTMENT OF D HOUSING Register V. 20, p. 178 V. 20, p. 180 V. 20, p. 1426	111-4-1853 111-4-1854 through 111-4-1864 111-4-1866 111-4-1869 111-4-1871 111-4-1872 111-4-1873 111-4-1877 111-4-1877 111-4-1877 111-4-1888 through 111-4-1885 111-4-1889 111-4-1890 through 111-4-1891 through 111-4-1990 through 111-4-1990 through 111-4-1991 111-4-1900 111-4-1901 111-4-1901 111-4-1910 111-4-1911	New Amended Amended Amended Amended New New New New Amended New Amended New Amended New Amended	V. 20, p. 1395-1405 V. 20, p. 1395-1405 V. 20, p. 1569 V. 20, p. 1570 V. 20, p. 1601 V. 20, p. 1601 V. 20, p. 1571 V. 20, p. 1572 V. 20, p. 1572 V. 20, p. 1572 V. 20, p. 1779-1781 V. 20, p. 1902 V. 20, p. 1902-1906 V. 21, p. 183-185 V. 21, p. 591-593 V. 21, p. 649-655 V. 21, p. 649-655 V. 21, p. 692-702 V. 21, p. 747 V. 21, p. 747
Reg. No. 93-1-1 through 93-1-4 93-4-6 93-6-1 through 93-6-4 AGENO Reg. No. 94-2-1 through 94-2-19 94-3-1 94-3-2 94-4-1 94-4-2 AGENO Reg. No. 99-8-8 99-8-9 99-9-1	ENCY 93: DEPA REVENUE—DIV PROPERTY VAI Action Revoked Amended Amended CY 94: BOARD C Action Amended New New Amended Amended New New SENCY 99: DEPA GRICULTURE—E VEIGHTS AND M Action Revoked Revoked Revoked Revoked Revoked	V. 20, p. 452 V. 20, p. 453 OF TAX APPEALS Register V. 21, p. 703-708 V. 21, p. 708 V. 21, p. 708 V. 21, p. 709 V. 21, p. 709 V. 21, p. 710 V. 21, p. 710	102-5-15 AGE HE Reg. No. 108-1-2 EME: Reg. No. 109-9-1 109-9-4 109-10-1 109-11-10 AG Co Reg. No. 110-4-1 110-6-1 110-6-3 110-6-2 110-6-3 110-6-4 110-6-5 110-7-1 through 110-7-4 110-7-5 110-7-6 110-7-8 110-7-9 110-7-10 AGI	New ENCY 108: STAT EALTH CARE C Action Amended AGENCY 109: E RGENCY MEDI Action Amended	V. 20, p. 572 TE EMPLOYEES OMMISSION Register V. 21, p. 1055 BOARD OF ICAL SERVICES Register V. 20, p. 1675 V. 20, p. 1677 V. 20, p. 1677 V. 20, p. 1679 ARTMENT OF D HOUSING Register V. 20, p. 179 V. 20, p. 178 V. 20, p. 180 V. 20, p. 1426	111-4-1853 111-4-1854 through 111-4-1864 111-4-1866 111-4-1867 111-4-1871 111-4-1872 111-4-1873 111-4-1877 111-4-1877 111-4-1877 111-4-1889 111-4-1886 through 111-4-1889 111-4-1893 111-4-1893 111-4-1894 through 111-4-1900 111-4-1901 111-4-1901 111-4-1901 111-4-1911 111-4-1911	New Amended Amended Amended New	V. 20, p. 1395-1405 V. 20, p. 1395-1405 V. 20, p. 1569 V. 20, p. 1570 V. 20, p. 1601 V. 20, p. 1571 V. 20, p. 1572 V. 20, p. 1572 V. 20, p. 1572 V. 20, p. 1572 V. 20, p. 1902 V. 20, p. 1902 V. 21, p. 183-185 V. 21, p. 591-593 V. 21, p. 649-655 V. 21, p. 649-655 V. 21, p. 692-702 V. 21, p. 747 V. 21, p. 747 V. 21, p. 748
Reg. No. 93-1-1 through 93-1-4 93-4-6 93-6-1 through 93-6-4 AGENO Reg. No. 94-2-1 through 94-2-19 94-2-20 94-3-1 94-4-2 AG Reg. No. 99-8-8 99-8-9 99-9-1	ENCY 93: DEPA REVENUE—DIV PROPERTY VAI Action Revoked Amended Amended CY 94: BOARD C Action Amended New New Amended Amended New New EENCY 99: DEPA RICULTURE—I VEIGHTS AND M Action Revoked Revoked Revoked Revoked Revoked Revoked Revoked	V. 20, p. 452 V. 20, p. 452, 453 OF TAX APPEALS Register V. 21, p. 703-708 V. 21, p. 708 V. 21, p. 708 V. 21, p. 709 V. 21, p. 710 V. 21, p.	102-5-15 AGE HE Reg. No. 108-1-2 EME: Reg. No. 109-9-1 109-9-4 109-10-1 109-11-10 AG Co Reg. No. 110-4-1 110-6-1 110-6-3 110-6-2 110-6-3 110-6-4 110-6-5 110-7-1 through 110-7-4 110-7-5 110-7-6 110-7-8 110-7-9 110-7-10 AGI	New ENCY 108: STAT EALTH CARE C Action Amended AGENCY 109: E RGENCY MEDI Action Amended	V. 20, p. 572 TE EMPLOYEES OMMISSION Register V. 21, p. 1055 BOARD OF ICAL SERVICES Register V. 20, p. 1675 V. 20, p. 1677 V. 20, p. 1677 V. 20, p. 1679 ARTMENT OF D HOUSING Register V. 20, p. 178 V. 20, p. 180 V. 20, p. 1426	111-4-1853 111-4-1854 through 111-4-1864 111-4-1866 111-4-1867 111-4-1871 111-4-1872 111-4-1873 111-4-1873 111-4-1877 111-4-1877 111-4-1878 through 111-4-1885 111-4-1886 through 111-4-1889 111-4-1890 through 111-4-1891 111-4-1900 111-4-1900 111-4-1901 111-4-1901 111-4-1911 111-4-1911 111-4-1911	New Amended Amended Amended Amended Amended Amended Amended New	V. 20, p. 1395-1405 V. 20, p. 1395-1405 V. 20, p. 1569 V. 20, p. 1570 V. 20, p. 1601 V. 20, p. 1571 V. 20, p. 1572 V. 20, p. 1902 V. 21, p. 1902-1906 V. 21, p. 183-185 V. 21, p. 591-593 V. 21, p. 649-655 V. 21, p. 692-702 V. 21, p. 747 V. 21, p. 747 V. 21, p. 748 V. 21, p. 748 V. 21, p. 748 V. 21, p. 748
Reg. No. 93-1-1 through 93-1-4 93-4-6 93-6-1 through 93-6-4 AGENO Reg. No. 94-2-1 through 94-2-18 94-2-20 94-3-1 94-3-2 94-4-1 94-4-2 AGG W Reg. No. 99-8-8 99-8-9 99-9-1 99-10-1	EENCY 93: DEPA REVENUE—DIV PROPERTY VAI Action Revoked Amended Amended CY 94: BOARD C Action Amended New New Amended Amended New New Amended Amended Amended Amended Amended New New Action EENCY 99: DEPA BRICULTURE—E VEIGHTS AND M Action Revoked Revoked Revoked Revoked Amended	V. 20, p. 452 V. 21, p. 703-708 V. 21, p. 708 V. 21, p. 708 V. 21, p. 709 V. 21, p. 709 V. 21, p. 710 V. 21, p. 12 V. 21, p. 12 V. 21, p. 12 V. 21, p. 12 V. 21, p. 12	102-5-15 AGE HE Reg. No. 108-1-2 EME: Reg. No. 109-9-1 109-9-4 109-10-1 109-11-10 AG CC Reg. No. 110-4-1 110-6-1a 110-6-2 110-6-3 110-6-4 110-6-5 110-7-1 through 110-7-5 110-7-6 110-7-8 110-7-8 110-7-9 110-7-10 AGI A comple	New ENCY 108: STAT EALTH CARE C Action Amended AGENCY 109: E RGENCY MEDI Action Amended EVOKE New	V. 20, p. 572 TE EMPLOYEES OMMISSION Register V. 21, p. 1055 BOARD OF ICAL SERVICES Register V. 20, p. 1675 V. 20, p. 1677 V. 20, p. 1677 V. 20, p. 1679 ARTMENT OF D HOUSING Register V. 20, p. 179 V. 20, p. 178 V. 20, p. 180 V. 20, p. 1426	111-4-1853 111-4-1854 through 111-4-1864 111-4-1866 111-4-1869 111-4-1871 111-4-1871 111-4-1872 111-4-1873 111-4-1874 through 111-4-1878 through 111-4-1885 111-4-1889 111-4-1889 111-4-1890 through 111-4-1890 through 111-4-1901 through 111-4-1901 through 111-4-1901 through 111-4-1910 111-4-1911 111-4-1910 111-4-1911 111-4-1911 111-4-1911 111-4-1913 111-4-1913 111-4-1913 111-4-1913	New Amended Amended Amended Amended New New New New Amended New Amended New	V. 20, p. 1395-1405 V. 20, p. 1395-1405 V. 20, p. 1569 V. 20, p. 1570 V. 20, p. 1601 V. 20, p. 1601 V. 20, p. 1571 V. 20, p. 1572 V. 20, p. 1572 V. 20, p. 1572 V. 20, p. 1779-1781 V. 20, p. 1902 V. 20, p. 1902-1906 V. 21, p. 183-185 V. 21, p. 591-593 V. 21, p. 649-655 V. 21, p. 649-655 V. 21, p. 747 V. 21, p. 744 V. 21, p. 748 V. 21, p. 748 V. 21, p. 749
Reg. No. 93-1-1 through 93-1-4 93-4-6 93-6-1 through 93-6-1 through 93-6-4 AGENO Reg. No. 94-2-1 through 94-2-19 94-3-1 94-3-2 94-4-1 94-4-2 AG AG W Reg. No. 99-8-8 99-8-9 99-9-1 99-10-1 99-25-1	EENCY 93: DEPA REVENUE—DIV PROPERTY VAI Action Revoked Amended Amended CY 94: BOARD C Action Amended New New Amended Amended Amended New New EENCY 99: DEPA ERICULTURE—E VEIGHTS AND N Action Revoked Revoked Revoked Revoked Amended Amended Amended Amended Amended Amended Amended Amended Amended	V. 20, p. 452 V. 21, p. 703-708 V. 21, p. 708 V. 21, p. 708 V. 21, p. 709 V. 21, p. 709 V. 21, p. 710 V. 21, p. 12 V. 21, p. 13	102-5-15 AGE HE Reg. No. 108-1-2 EME: Reg. No. 109-9-1 109-9-4 109-10-1 109-11-10 AG CO Reg. No. 110-4-1 110-6-1 110-6-3 110-6-3 110-6-4 110-6-5 110-7-1 through 110-7-4 110-7-5 110-7-6 110-7-9 110-7-10 AGI A complete Kansas	New ENCY 108: STAT EALTH CARE C Action Amended AGENCY 109: E RGENCY MEDI Action Amended Amended Amended New ENCY 110: DEP. OMMERCE AN Action Amended EVOKE NEW ENCY 111: KAN ete index listing Lottery from 196	V. 20, p. 572 TE EMPLOYEES OMMISSION Register V. 21, p. 1055 BOARD OF ICAL SERVICES Register V. 20, p. 1675 V. 20, p. 1677 V. 20, p. 1677 V. 20, p. 1679 ARTMENT OF D HOUSING Register V. 20, p. 178 V. 20, p. 180 V. 20, p. 1426 V.	111-4-1853 111-4-1854 through 111-4-1864 111-4-1866 111-4-1869 111-4-1871 111-4-1872 111-4-1873 111-4-1877 111-4-1877 111-4-1877 111-4-1888 through 111-4-1888 through 111-4-1889 through 111-4-1890 through 111-4-1891 through 111-4-1910 111-4-1910 111-4-1910 111-4-1911 111-4-1911 111-4-1911 111-4-1911 111-4-1913 111-4-1913 111-4-1913 111-4-1913 111-4-1913 111-4-1913 111-4-1913 111-4-1913 111-4-1913 111-4-1923 111-4-1923 111-5-23	New Amended Amended Amended Amended Amended Amended New New New New Amended New New Amended New New Amended New Amended	V. 20, p. 1347 V. 20, p. 1395-1405
Reg. No. 93-1-1 through 93-1-4 93-4-6 93-6-1 through 93-6-4 AGENO Reg. No. 94-2-1 through 94-2-19 94-3-1 94-3-2 94-4-1 94-4-2 AGG W Reg. No. 99-8-8 99-9-1 99-10-1 99-25-1 99-25-3 99-25-4	ENCY 93: DEPA REVENUE—DIV PROPERTY VAI Action Revoked Amended Amended CY 94: BOARD C Action Amended New New Amended Amended Amended New New SENCY 99: DEPA RICULTURE—I VEIGHTS AND I Action Revoked Revoked Revoked Revoked Amended	V. 20, p. 452 V. 21, p. 703-708 V. 21, p. 708 V. 21, p. 708 V. 21, p. 709 V. 21, p. 709 V. 21, p. 710 V. 21, p. 12 V. 21, p. 13 V. 21, p. 13	Reg. No. 108-1-2 EME: Reg. No. 109-9-1 109-9-4 109-10-1 109-11-10 AG Co Reg. No. 110-4-1 110-6-1 110-6-1 110-6-3 110-6-4 110-7-5 110-7-6 110-7-8 110-7-9 110-7-10 A Complete Kansas found in the Reg. No. 100-10 110-7-1	New ENCY 108: STAT EALTH CARE C Action Amended AGENCY 109: E RGENCY MEDI Action Amended Amended Amended New ENCY 110: DEP OMMERCE AN Action Amended ENCY 110: DEP OMMERCE AN Action Action Amended Amended Amended Amended Amended Amended Amended ENEW New New New New New New New New ENCY 111: KAN The No. 15 The Vol. 19, No. 15 The Vol. 19 T	V. 20, p. 572 TE EMPLOYEES OMMISSION Register V. 21, p. 1055 BOARD OF ICAL SERVICES Register V. 20, p. 1675 V. 20, p. 1677 V. 20, p. 1677 V. 20, p. 1679 ARTMENT OF D HOUSING Register V. 20, p. 178 V. 20, p. 180 V. 20, p. 1426 V	111-4-1853 111-4-1854 through 111-4-1864 111-4-1866 111-4-1869 111-4-1871 111-4-1872 111-4-1873 111-4-1877 111-4-1877 111-4-1877 111-4-1878 through 111-4-1889 111-4-1889 111-4-1893 111-4-1894 through 111-4-1900 through 111-4-1910 111-4-1911 111-4-1911 111-4-1913 111-4-1923 111-5-23 111-5-23 111-5-24	New Amended Amended Amended Amended Amended Amended Amended New	V. 20, p. 1347 V. 20, p. 1395-1405
Reg. No. 93-1-1 through 93-1-4 93-4-6 93-6-1 through 93-6-4 AGENO Reg. No. 94-2-1 through 94-2-19 94-2-20 94-3-1 94-2-20 94-3-1 94-4-2 AGG Reg. No. 99-8-8 99-9-1 99-10-1 99-25-1 99-25-3 99-25-6	EENCY 93: DEPA REVENUE—DIV PROPERTY VAI Action Revoked Amended Amended CY 94: BOARD C Action Amended New New Amended Amended Amended New New EENCY 99: DEPA ERICULTURE—E VEIGHTS AND N Action Revoked Revoked Revoked Revoked Amended Amended Amended Amended Amended Amended Amended Amended Amended	V. 20, p. 452 V. 21, p. 703-708 V. 21, p. 708 V. 21, p. 708 V. 21, p. 709 V. 21, p. 709 V. 21, p. 710 V. 21, p. 12 V. 21, p. 13	102-5-15 AGE HE Reg. No. 108-1-2 EME: Reg. No. 109-9-1 109-9-4 109-10-1 109-11-10 AG CO Reg. No. 110-4-1 110-6-1 110-6-1 110-6-3 110-6-2 110-6-3 110-7-4 110-7-5 110-7-6 110-7-9 110-7-10 AGI A complethe Kansas found in the Kansas Regenerics Ka	New ENCY 108: STAT EALTH CARE C Action Amended AGENCY 109: E RGENCY MEDI Action Amended Amended Amended New ENCY 110: DEP OMMERCE AN Action Amended ENCY 111: KAN New New New New New New New New New Ne	V. 20, p. 572 TE EMPLOYEES OMMISSION Register V. 21, p. 1055 BOARD OF ICAL SERVICES Register V. 20, p. 1675 V. 20, p. 1677 V. 20, p. 1677 V. 20, p. 1679 ARTMENT OF D HOUSING Register V. 20, p. 178 V. 20, p. 180 V. 20, p. 180 V. 20, p. 1426 V.	111-4-1853 111-4-1854 through 111-4-1864 111-4-1866 111-4-1867 111-4-1871 111-4-1872 111-4-1873 111-4-1873 111-4-1877 111-4-1877 111-4-1878 through 111-4-1885 111-4-1886 through 111-4-1890 through 111-4-1890 through 111-4-1900 111-4-1901 through 111-4-1901 through 111-4-1911 111-4-1911 111-4-1911 111-4-1913 111-4-1923 111-5-23 111-5-24 111-5-27	New Amended Amended Amended New New New New New New New New Amended New Amended	V. 20, p. 1347 V. 20, p. 1395-1405
Reg. No. 93-1-1 through 93-1-4 93-4-6 93-6-1 through 93-6-4 AGENO Reg. No. 94-2-1 through 94-2-19 94-3-1 94-3-2 94-4-1 94-4-2 AGG W Reg. No. 99-8-8 99-9-1 99-10-1 99-25-1 99-25-3 99-25-4	ENCY 93: DEPA REVENUE—DIV PROPERTY VAI Action Revoked Amended Amended CY 94: BOARD C Action Amended New New Amended Amended Amended New New SENCY 99: DEPA RICULTURE—I VEIGHTS AND I Action Revoked Revoked Revoked Revoked Amended	V. 20, p. 452 V. 21, p. 703-708 V. 21, p. 708 V. 21, p. 708 V. 21, p. 709 V. 21, p. 709 V. 21, p. 710 V. 21, p. 12 V. 21, p. 13 V. 21, p. 13	Reg. No. 108-1-2 EME: Reg. No. 109-9-1 109-9-4 109-10-1 109-11-10 AG CO Reg. No. 110-4-1 110-6-1 110-6-1 110-6-5 110-7-1 through 110-7-4 110-7-5 110-7-6 110-7-9 110-7-10 A Complete Kansas found in the Kansas Reg published a published a graph of the stansas found in the Kansas Reg published a graph of the stansas found in the Kansas Reg published a graph of the stansas found in the Kansas Reg published a graph of the stansas found in the stansas found in the stansas found in the Kansas Reg published a graph of the stansas found in the stansas fou	New ENCY 108: STAT EALTH CARE C Action Amended AGENCY 109: E RGENCY MEDI Action Amended Amended Amended New ENCY 110: DEP OMMERCE AN Action Amended ENCY 111: KAN New New New New New New New New New Ne	V. 20, p. 572 TE EMPLOYEES OMMISSION Register V. 21, p. 1055 BOARD OF ICAL SERVICES Register V. 20, p. 1675 V. 20, p. 1677 V. 20, p. 1677 V. 20, p. 1679 ARTMENT OF D HOUSING Register V. 20, p. 178 V. 20, p. 180 V. 20, p. 180 V. 20, p. 1426 V	111-4-1853 111-4-1854 through 111-4-1864 111-4-1866 111-4-1869 111-4-1871 111-4-1872 111-4-1873 111-4-1877 111-4-1877 111-4-1877 111-4-1878 through 111-4-1889 111-4-1889 111-4-1893 111-4-1894 through 111-4-1900 through 111-4-1910 111-4-1911 111-4-1911 111-4-1913 111-4-1923 111-5-23 111-5-23 111-5-24	New Amended Amended Amended Amended Amended Amended Amended New	V. 20, p. 1347 V. 20, p. 1395-1405
Reg. No. 93-1-1 through 93-1-4 93-4-6 93-6-1 through 93-6-4 AGENO Reg. No. 94-2-1 through 94-2-19 94-2-20 94-3-1 94-2-20 94-3-1 94-4-2 AGG Reg. No. 99-8-8 99-9-1 99-10-1 99-25-1 99-25-3 99-25-6	ENCY 93: DEPA REVENUE—DIV PROPERTY VAI Action Revoked Amended Amended CY 94: BOARD C Action Amended New New Amended Amended New SENCY 99: DEPA RICULTURE—I VEIGHTS AND M Action Revoked Revoked Revoked Revoked Amended	V. 20, p. 452 V. 20, p. 452, 453 OF TAX APPEALS Register V. 21, p. 703-708 V. 21, p. 708 V. 21, p. 708 V. 21, p. 709 V. 21, p. 709 V. 21, p. 710 V. 21, p. 710 V. 21, p. 710 V. 21, p. 710 V. 21, p. 12 V. 21, p. 13 V. 21, p. 13	102-5-15 AGE HE Reg. No. 108-1-2 EME: Reg. No. 109-9-1 109-9-4 109-10-1 109-11-10 AG CO Reg. No. 110-4-1 110-6-1 110-6-1 110-6-3 110-6-2 110-6-3 110-7-4 110-7-5 110-7-6 110-7-9 110-7-10 AGI A complethe Kansas found in the Kansas Regenerics Ka	New ENCY 108: STAT EALTH CARE C Action Amended AGENCY 109: E RGENCY MEDI Action Amended Amended Amended New ENCY 110: DEP OMMERCE AN Action Amended ENCY 111: KAN New New New New New New New New New Ne	V. 20, p. 572 TE EMPLOYEES OMMISSION Register V. 21, p. 1055 BOARD OF ICAL SERVICES Register V. 20, p. 1675 V. 20, p. 1677 V. 20, p. 1677 V. 20, p. 1679 ARTMENT OF D HOUSING Register V. 20, p. 178 V. 20, p. 180 V. 20, p. 180 V. 20, p. 1426 V.	111-4-1853 111-4-1854 through 111-4-1864 111-4-1866 111-4-1867 111-4-1871 111-4-1872 111-4-1873 111-4-1873 111-4-1877 111-4-1877 111-4-1878 through 111-4-1885 111-4-1886 through 111-4-1890 through 111-4-1890 through 111-4-1900 111-4-1901 through 111-4-1901 through 111-4-1911 111-4-1911 111-4-1911 111-4-1913 111-4-1923 111-5-23 111-5-24 111-5-27	New Amended Amended Amended New New New New New New New New Amended New Amended	V. 20, p. 1347 V. 20, p. 1395-1405
Reg. No. 93-1-1 through 93-1-4 93-4-6 93-6-1 through 93-6-4 AGENO Reg. No. 94-2-1 through 94-2-19 94-2-20 94-3-1 94-3-2 94-4-1 94-4-2 AGG W Reg. No. 99-8-8 99-8-9 99-1 99-10-1 99-25-1 99-25-3 99-25-4 99-25-6	ENCY 93: DEPA REVENUE—DIV PROPERTY VAI Action Revoked Amended Amended CY 94: BOARD C Action Amended New New Amended Amended New New SENCY 99: DEPA BRICULTURE—I VEIGHTS AND M Action Revoked Revoked Revoked Revoked Amended	V. 20, p. 452 V. 21, p. 703-708 V. 21, p. 708 V. 21, p. 708 V. 21, p. 709 V. 21, p. 709 V. 21, p. 709 V. 21, p. 710 V. 21, p. 710 V. 21, p. 710 V. 21, p. 12 V. 21, p. 13 V. 21, p. 13	Reg. No. 108-1-2 EME: Reg. No. 109-9-1 109-9-4 109-10-1 109-11-10 AG Co Reg. No. 110-4-1 110-6-1 110-6-1 110-6-5 110-7-1 through 110-7-4 110-7-5 110-7-6 110-7-8 110-7-9 110-7-10 A Complete Kansas found in the Kansas Regublished a Reg. No.	New ENCY 108: STAT EALTH CARE C Action Amended AGENCY 109: E RGENCY MEDI Action Amended IREVOKED INTERIOR INTER	V. 20, p. 572 TE EMPLOYEES OMMISSION Register V. 21, p. 1055 BOARD OF ICAL SERVICES Register V. 20, p. 1675 V. 20, p. 1677 V. 20, p. 1677 V. 20, p. 1679 ARTMENT OF D HOUSING Register V. 20, p. 178 V. 20, p. 180 V. 20, p. 1426 V. 20	111-4-1853 111-4-1854 through 111-4-1864 111-4-1866 111-4-1869 111-4-1871 111-4-1872 111-4-1873 111-4-1877 111-4-1877 111-4-1877 111-4-1878 through 111-4-1885 111-4-1886 through 111-4-1889 through 111-4-1890 through 111-4-1990 through 111-4-1991 111-4-1910 111-4-1911 111-4-1911 111-4-1911 111-4-1913 111-4-1922 111-4-1923 111-5-23 111-5-24 111-5-78 111-5-78 111-5-78	New Amended Amended Amended New New New New New New New New Amended New Amended	V. 20, p. 1347 V. 20, p. 1395-1405
Reg. No. 93-1-1 through 93-1-4 93-4-6 93-6-1 through 93-6-4 AGENO Reg. No. 94-2-1 through 94-2-19 94-3-1 94-3-2 94-4-1 94-4-2 AGG W Reg. No. 99-8-8 99-9-1 99-10-1 99-25-1 99-25-3 99-25-4 99-25-6 99-25-7 99-26-1	ENCY 93: DEPA REVENUE—DIV PROPERTY VAI Action Revoked Amended Amended CY 94: BOARD C Action Amended New New Amended New Amended New Amended New New Amended Revoked Revoked Revoked Revoked Revoked Amended	V. 20, p. 452 V. 20, p. 452, 453 OF TAX APPEALS Register V. 21, p. 703-708 V. 21, p. 708 V. 21, p. 708 V. 21, p. 709 V. 21, p. 709 V. 21, p. 710 V. 21, p. 710 V. 21, p. 710 V. 21, p. 710 V. 21, p. 12 V. 21, p. 13 V. 21, p. 13	102-5-15 AGE HE Reg. No. 108-1-2 EME: Reg. No. 109-9-1 109-9-4 109-10-1 109-11-10 AGC Reg. No. 110-4-1 110-6-1a 110-6-3 110-6-3 110-6-4 110-6-5 110-7-1 through 110-7-6 110-7-8 110-7-9 110-7-10 AGI A complete Kansas found in the Kansas found i	New ENCY 108: STAT EALTH CARE C Action Amended AGENCY 109: E RGENCY MEDI Action Amended Amended Amended New ENCY 110: DEP OMMERCE AN Action Amended ENCY 111: KAN New New New New New New New New New Ne	V. 20, p. 572 TE EMPLOYEES OMMISSION Register V. 21, p. 1055 BOARD OF ICAL SERVICES Register V. 20, p. 1675 V. 20, p. 1677 V. 20, p. 1677 V. 20, p. 1679 ARTMENT OF D HOUSING Register V. 20, p. 178 V. 20, p. 180 V. 20, p. 180 V. 20, p. 1426 V	111-4-1853 111-4-1870 111-4-1864 111-4-1866 111-4-1869 111-4-1871 111-4-1872 111-4-1873 111-4-1877 111-4-1877 111-4-1877 111-4-1877 111-4-1889 111-4-1889 111-4-1889 111-4-1893 111-4-1893 111-4-1900 111-4-1901 111-4-1911 111-4-1911 111-4-1913 111-4-1922 111-4-1923 111-5-23 111-5-24 111-5-27 111-5-78 111-7-119 through	New Amended Amended Amended Amended Amended Amended New New New New New New New New New Amended	V. 20, p. 1347 V. 20, p. 1395-1405
Reg. No. 93-1-1 through 93-1-4 93-4-6 93-6-1 through 93-6-4 AGENO Reg. No. 94-2-1 through 94-2-19 94-2-20 94-3-1 94-2-20 94-3-2 94-3-2 94-3-2 94-3-2 94-3-2 94-3-2 94-3-2 94-3-2 94-3-2 94	ENCY 93: DEPA REVENUE—DIV PROPERTY VAI Action Revoked Amended Amended CY 94: BOARD C Action Amended New New Amended New Amended New Amended New New Amended Amended REVOKED Action Revoked Revoked Revoked Revoked Amended	V. 20, p. 452 V. 21, p. 703-708 V. 21, p. 708 V. 21, p. 708 V. 21, p. 709 V. 21, p. 709 V. 21, p. 709 V. 21, p. 710 V. 21, p. 710 V. 21, p. 710 V. 21, p. 12 V. 21, p. 13 V. 21, p. 13	102-5-15 AGE HE Reg. No. 108-1-2 EME. Reg. No. 109-9-1 109-9-4 109-10-1 109-11-10 AG CO Reg. No. 110-4-1 110-6-1 110-6-3 110-6-4 110-6-5 110-7-1 110-7-5 110-7-6 110-7-8 110-7-9 110-7-10 AGI A complete Kansas found in the Kansas Reguls on the Kansas Reguls o	New ENCY 108: STAT EALTH CARE C Action Amended AGENCY 109: E RGENCY MEDI Action Amended IREVOKED INTERIOR INTER	V. 20, p. 572 TE EMPLOYEES OMMISSION Register V. 21, p. 1055 BOARD OF ICAL SERVICES Register V. 20, p. 1675 V. 20, p. 1677 V. 20, p. 1677 V. 20, p. 1679 ARTMENT OF D HOUSING Register V. 20, p. 178 V. 20, p. 180 V. 20, p. 1426 V. 20	111-4-1853 111-4-1854 through 111-4-1864 111-4-1866 111-4-1867 111-4-1871 111-4-1872 111-4-1873 111-4-1873 111-4-1877 111-4-1877 111-4-1878 through 111-4-1885 through 111-4-1889 111-4-1889 111-4-1890 through 111-4-1900 111-4-1901 through 111-4-1901 through 111-4-1911 111-4-1911 111-4-1913 111-5-23 111-5-23 111-5-24 111-5-78 111-7-119 through	New Amended Amended Amended Amended Amended Amended Amended New New New New New New New New Amended	V. 20, p. 1347 V. 20, p. 1395-1405
Reg. No. 93-1-1 through 93-1-4 93-4-6 93-6-1 through 93-6-4 AGENO Reg. No. 94-2-1 through 94-2-19 94-3-1 94-3-2 94-4-1 94-4-2 AGG W Reg. No. 99-8-8 99-9-1 99-10-1 99-25-1 99-25-3 99-25-4 99-25-6 99-25-7 99-26-1	ENCY 93: DEPA REVENUE—DIV PROPERTY VAI Action Revoked Amended Amended CY 94: BOARD C Action Amended New New Amended New Amended New Amended New New Amended Amended REVOKED Action Revoked Revoked Revoked Revoked Amended	V. 20, p. 452 V. 21, p. 703-708 V. 21, p. 708 V. 21, p. 708 V. 21, p. 709 V. 21, p. 709 V. 21, p. 709 V. 21, p. 710 V. 21, p. 710 V. 21, p. 710 V. 21, p. 12 V. 21, p. 13 V. 21, p. 13	102-5-15 AGE HE Reg. No. 108-1-2 EME: Reg. No. 109-9-1 109-9-4 109-10-1 109-11-10 AGC Reg. No. 110-4-1 110-6-1a 110-6-3 110-6-3 110-6-4 110-6-5 110-7-1 through 110-7-6 110-7-8 110-7-9 110-7-10 AGI A complete Kansas found in the Kansas found i	New ENCY 108: STAT EALTH CARE C Action Amended AGENCY 109: E RGENCY MEDI Action Amended IREVOKED INTERIOR INTER	V. 20, p. 572 TE EMPLOYEES OMMISSION Register V. 21, p. 1055 BOARD OF ICAL SERVICES Register V. 20, p. 1675 V. 20, p. 1677 V. 20, p. 1677 V. 20, p. 1679 ARTMENT OF D HOUSING Register V. 20, p. 178 V. 20, p. 180 V. 20, p. 1426 V. 20	111-4-1853 111-4-1870 111-4-1864 111-4-1866 111-4-1869 111-4-1871 111-4-1872 111-4-1873 111-4-1877 111-4-1877 111-4-1877 111-4-1877 111-4-1889 111-4-1889 111-4-1889 111-4-1893 111-4-1893 111-4-1900 111-4-1901 111-4-1911 111-4-1911 111-4-1913 111-4-1922 111-4-1923 111-5-23 111-5-24 111-5-27 111-5-78 111-7-119 through	New Amended Amended Amended Amended Amended Amended New New New New New New New New New Amended	V. 20, p. 1347 V. 20, p. 1395-1405

					_			
111-7-158			115-2-4	Amended	V. 20, p. 1499	115-18-7	Amended	V. 21, p. 453
through			115-2-6	Amended	V. 21, p. 451	115-18-8	Amended	V. 20, p. 1504
111-7-162	New	V. 20, p. 577	115-3-1	Amended	V. 20, p. 766	115-18-9	Amended	V. 20, p. 1504
111-7-159	Amended	V. 20, p. 1101	115-3-2	Amended	V. 20, p. 767	115-18-14	Amended	V. 20, p. 1504
111-7-162	Amended	V. 20, p. 944	115-4-1	Revoked	V. 20, p. 767	115-18-17	New	V. 20, p. 1062
111-7-163		-	115-4-2	New	V. 20, p. 767	115-20-1	Amended	V. 20, p. 1063
through			115-4-3	Revoked	V. 20, p. 768	115-20-2	Amended	V. 20, p. 1063
111-7-170	New	V. 20, p. 1101-1103	115-4-4	Amended	V. 21, p. 452	115-21-1	Amended	V. 20, p. 1803
111-7-165	Amended	V. 20, p. 1194	115-4-5	Revoked	V. 20, p. 769	115-21-2	Amended	V. 20, p. 1804
111-7-171			115-4-7			115-21-3	Revoked	V. 20, p. 1804 V. 20, p. 1804
through	N.T.	V 00 1500 1500	through			115-21-4	New	V. 20, p. 1804
111-7-175	New	V. 20, p. 1782, 1783	115-4-10	Revoked	V. 20, p. 769	115-22-1	New	V. 20, p. 1804 V. 20, p. 1804
111-7-176			115-4-11	Amended	V. 20, p. 769		GENCY 117: RI	
through 111-7-180	New	V 21 p 656 657	115-4-12	Revoked	V. 20, p. 770	A		
111-7-160	New	V. 21, p. 656, 657	115-4-13	Amended	V. 20, p. 770		APPRAISAL	BOARD
through			115-8-1	Amended	V. 20, p. 1061	Reg. No.	Action	Register
111-8-126	New	V. 20, p. 1573-1579	115-8-4	Amended	V. 20, p. 1500	117-6-1	Amended	V. 21, p. 658
111-9-111	New	V. 20, p. 1406	115-8-5	Revoked	V. 20, p. 1061	117-6-3	Amended	V. 20, p. 862
111-9-112	Amended	V. 20, p. 1579	115-8-8 115-8-12	Amended	V. 20, p. 1061	117-6-4	New	V. 20, p. 863
111-9-113	Amended	V. 21, p. 186	115-8-12	Amended Revoked	V. 20, p. 1062	117-7-1	Amended	V. 20, p. 863
111-9-114	New	V. 21, p. 657	115-8-18	Revoked	V. 20, p. 1062 V. 20, p. 1062	117-8-1	Amended	V. 21, p. 659
111-9-115	New	V. 21, p. 702	115-8-10	Amended	V. 20, p. 1062 V. 20, p. 1062			STORICAL SOCIETY
111-9-116	New	V. 21, p. 703	115-8-21	Amended	V. 20, p. 1062 V. 20, p. 1062			
		AS RACING AND	115-9-4	Amended	V. 21, p. 177	Reg. No.	Action	Register
	GAMING CO	MMISSION	115-11-1	Amended	V. 21, p. 177 V. 21, p. 177	118-5-1		
Reg. No.	Action	Register	115-11-2	Amended	V. 21, p. 177	through		
112-4-1	Amended	V. 20, p. 765	115-13-1	Amended	V. 20, p. 1500	118-5-10	New (T)	V. 20, p. 1492-1495
112-7-19	Amended	V. 20, p. 547	115-13-2	Amended	V. 20, p. 1500	AC	GENCY 125: AG	RICULTURAL
112-10-3	Amended	V. 20, p. 1728	115-13-5	Amended	V. 20, p. 1501		REMEDIATIO	
112-10-6	Amended	V. 20, p. 1728	115-14-2	Amended	V. 20, p. 1501	D M		
112-11-20	Amended	V. 20, p. 945	115-14-3	Amended	V. 20, p. 1502	Reg. No.	Action	Register
112-17-4	Amended	V. 20, p. 1729	115-14-5	Amended	V. 20, p. 1502	125-1-1		
112-18-11	Amended	V. 20, p. 1922	115-14-6	Amended	V. 20, p. 1502	through		
AG		PARTMENT OF	115-14-7	Revoked	V. 20, p. 1502	125-1-9	New (T)	V. 20, p. 1496-1498
D 17	WILDLIFE A		115-14-9	Amended	V. 20, p. 1502	125-1-1		
Reg. No.	Action	Register	115-14-10	Amended	V. 20, p. 1503	through		
115-2-1	Amended	V. 20, p. 1499	115-18-5	Revoked	V. 20, p. 1504	125-1-9	New	V. 20, p. 1891-1893

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